Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main

Document Page 1 of 55

| Fill in this information to identify your case: |  |                                    |
|---|--|------------------------------------|
| United States Bankruptcy Court for the :        |  |                                    |
| NORTHERN District of ILLINOIS (State)           |  |                                    |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

### **Official Form 101**

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Identify Yourself   |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  |                            |   |
|    | Write the name that is on your  | Arnell                     |   |
|    | government-issued picture<br>identification (for example,<br>your driver's license or | First name                 | First name                                    |
|    | passport).  | Middle name                | Middle name                                   |
|    | Bring your picture  | Bryant                     | ·   |
|    | identification to your meeting with the trustee.                                      | Last name                  | Last name                                     |
|    |   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last 8   | First name                 | First name                                    |
|    | years   |                            |   |
|    | Include your married or maiden names.   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
|    |   |                            |   |
|    |   | First name                 | First name                                    |
|    |   | Middle name                | Middle name                                   |
|    |   | made name                  | made name                                     |
|    |   | Last name                  | Last name                                     |
|    |   |                            |   |
| 3. | Only the last 4 digits of your Social Security  | XXX - XX - <u>1670</u>     | XXX - XX                                      |
|    | number or federal<br>Individual Taxpayer  | OR                         | OR  |
|    | Identification number   | 9xx - xx                   | <b>9</b> xx - xx                              |

Case 16-30716 Entered 09/27/16 14:35:32 Desc Main Doc 1 Filed 09/27/16 Document Page 2 of 55 Arnell Bryant Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names I have not used any business names or EINs. and Employer I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in Business name Business name the last 8 years Include trade names and Business name Business name doing business as names Where you live If Debtor 2 lives at a different address: 415 S Homan Ave Number Street Number Street Unit 1 Chicago IL 60624 City ZIP Code ZIP Code COOK County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send the one above, fill it in here. Note that the court any notices to you at this mailing address. will send any notices this mailing address. Number Street Number Street P.O. Box P.O. Box City State ZIP Code City State ZIP Code Check one: Check one: Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy. I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. I have another reason. Explain I have another reason. Explain.

| ٢ | (See 28 U.S.C. § 1408 |  |
|---|-----------------------|--|
|   |                       |  |
|   |                       |  |
| _ |                       |  |

| _ | (See 28 U.S.C. § 1408 |
|---|-----------------------|
|   |                       |
|   |                       |
|   |                       |

Debtor 1

| Arnell     |             | Document<br>Bryant |
|------------|-------------|--------------------|
| First Name | Middle Name | Last Name          |

Case Number (if known) \_

| Pa  | rt 2: Tell the Court About You                     | r Bankruptcy                     | Case  |  |  |  |  |
|-----|--|----------------------------------|---|--|--|--|--|
| 7.  | The chapter of the<br>Bankruptcy Code you          |                                  |   |  |  | Required by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box.   |  |
|     | are choosing to file under                         | ■ Chap                           | ter 7   |  |  |  |  |
|     | under  | ☐ Chap                           | ter 11  |  |  |  |  |
|     |  | ☐ Chap                           | ter 12  |  |  |  |  |
|     |  | ☐ Chap                           | ter 13  |  |  |  |  |
| 8.  | How you will pay the fee                           | local<br>yours<br>subm<br>with a | court for<br>self, you<br>witting you<br>a pre-po | or more details at<br>u may pay with ca<br>our payment on y<br>rinted address. | oout how you may<br>ash, cashier's chec<br>your behalf, your a     | n. Please check with the clerk's office in your pay. Typically, if you are paying the fee lock, or money order. If your attorney is attorney may pay with a credit card or check loose this option, sign and attach the                                      |  |
|     |  |                                  |   |  |  | e in Installments (Official Form 103A).  |  |
|     |  | By la<br>less t<br>pay t         | w, a jud<br>han 15<br>he fee i                    | dge may, but is no<br>0% of the official<br>n installments). It                | ot required to, waiv<br>poverty line that a<br>f you choose this o | uest this option only if you are filing for Chapter 7. ive your fee, and may do so only if your income is applies to your family size and you are unable to option, you must fill out the <i>Application to Have the</i> 3B) and file it with your petition. |  |
| 9.  | Have you filed for bankruptcy within the           | ■ No                             |   |  |  |  |  |
|     | last 8 years?                                      | ☐ Yes.                           | District  | None   | When   | Case Number<br>MM / DD / YYYY  |  |
|     |  |                                  | District  | None   | When   | Case Number  |  |
|     |  |                                  | District  |  | When   | Case Number  |  |
| 10. | Are any bankruptcy cases pending or being          | No                               |   |  |  |  |  |
|     | filed by a spouse who is not filing this case with | ☐ Yes.                           |   |  |  | Relationship to you  Case Number, if known   |  |
|     | you, or by a business parter, or by affiliate?     |                                  | District  |  | vilen  | MM / DD / YYYY   |  |
|     |  |                                  |   |  |  | Relationship to you  |  |
|     |  |                                  | District  |  | When   | Case Number, if known  |  |
| 11. | Do you rent your residence?                        | □ No.<br>■ Yes.                  | Go to l<br>Has yo                                 | our landlord obtaine   | d an eviction judgme   | ent against you and do you want to stay in your  |  |
|     |  |                                  |   | No. Go to line 12.<br>Yes. Fill out <i>Initial S</i><br>his bankruptcy petif   |  | Eviction Judgment Against You (Form 101A) and file it with   |  |

| Ousc 10 00110 | D00 ± | 1 1100 03/21/10 | Littered 03/2 |
|---------------|-------|-----------------|---------------|
|               |       | Document        | Page 4 of 55  |
| Arnell        |       | Bryant          | Case          |

Last Name

Middle Name

| Case Number (if known) |  |
|------------------------|--|

|     | Tt 3: Report About Any Busine   |                 |  |                |
|-----|---|-----------------|--|----------------|
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.<br>□ Yes. | Go to Part 4.<br>Name and location of business   |                |
|     | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as   |                 | Name of business, if any   |                |
|     | a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it  |                 | Number Street  |                |
|     | to this petition.   |                 | City   | State Zip Code |
|     |   |                 | Check the appropriate box to describe your business:   |                |
|     |   |                 | ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  |                |
|     |   |                 | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)   | ))             |
|     |   |                 | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))   | ,              |
|     |   |                 | Commodity Broker (as defined in 11 U.S.C. § 101(6))  |                |
|     |   |                 | ☐ None of the above  |                |
| Pa  | are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  | No. I           | am not filing under Chapter 11.  am filing under Chapter 11, but I am NOT a small business debtor a he Bankruptcy Code.  am filing under Chapter 11 and I am a small business debtor accord Bankruptcy Code. |                |
|     |   | e Any Hazard    | ous Property or Any Property That Needs Immediate Attention  |                |
| 14  | Do you own or have any  |                 | ous Property or Any Property That Needs Immediate Attention  |                |
| 14. | Do you own or have any<br>property that poses or is<br>alleged to pose a threat<br>of imminent and  | No.             | ous Property or Any Property That Needs Immediate Attention  What is the hazard?   |                |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own  | ■ No.           |  |                |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  | ■ No.           | What is the hazard?  If immediate attention is needed, why is it needed?   |                |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | ■ No.           | What is the hazard?  |                |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | ■ No.           | What is the hazard?  If immediate attention is needed, why is it needed?  Where is the property?   |                |

Debtor 1

First Name

Case 16-30716

Doc 1 Filed 09/27/16 Document

Entered 09/27/16 14:35:32 Desc Main Page 5 of 55

Debtor 1

Arnell First Name

Middle Name

Bryant Last Name Case Number (if known) \_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About | Deptor | 1: |
|-------|--------|----|
|       |        |    |

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing | abou |
|---|------|
| credit counseling because of:           |      |

credit counseling because of.

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of:                 |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-30716 Doc 1

Filed 09/27/16 Document Bryant

Entered 09/27/16 14:35:32 Desc Main Page 6 of 55

| Debtor 1 | F |
|----------|---|
| D 0010   | _ |

Arnell First Name

Middle Name

Last Name

Case Number (if known) \_

| 16. | What kind of debts do you have?   |  | y consumer debts? Consumer debts are dell primarily for a personal, family, or household                       |                                       |  |
|-----|---|--|--|---------------------------------------|--|
|     |   | No. Go to line 16b. Yes. Go to line 17.  |  |                                       |  |
|     |   |  | y business debts? Business debts are debt estment or through the operation of the busine                       |                                       |  |
|     |   | No. Go to line 16c. ☐Yes. Go to line 17.   |  |                                       |  |
|     |   | 16c. State the type of debts you   | owe that are not consumer debts or business  | debts.                                |  |
| 17. | Are you filing under Chapter 7?   | No. I am not filing under C  | hapter 7. Go to line 18.   |                                       |  |
|     | Do you estimate that after any exempt property is excluded and  |  | ter 7. Do you estimate that after any exempt pes are paid that funds will be available to distri               | • •                                   |  |
|     | administrative expenses<br>are paid that funds will be<br>available for distribution<br>to unsecured creditors? | ∐Yes.  |  |                                       |  |
| 18. | How many creditors do   | 1-49   | 1,000-5,000  | <b>2</b> 5,001-50,000                 |  |
|     | you estimate that you   | □ 50-99  | 5,001-10,000   | <u></u> 50,001-100,000                |  |
|     | owe?  | ☐ 100-199<br>☐ 200-999   | 10,001-25,000  | ☐ More than 100,000                   |  |
| 19. | How much do you   | \$0-\$50,000   | \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion            |  |
|     | estimate your assets to   | <b>\$50,001-\$100,000</b>  | \$10,000,001-\$50 million  | □\$1,000,000,001-\$10 billion         |  |
|     | be worth?   | \$100,001-\$500,000  | □ \$50,000,001-\$100 million   | \$10,000,000,001-\$50 billion         |  |
|     |   | \$500,001-\$1 million  | □ \$100,000,001-\$500 million  | ☐More than \$50 billion               |  |
| 20. | How much do you   | □ \$0-\$50,000<br>□  | \$1,000,001-\$10 million   | \$500,000,001-\$1 billion             |  |
|     | estimate your liabilities   | \$50,001-\$100,000   | \$10,000,001-\$50 million  | \$1,000,000,001-\$10 billion          |  |
|     | to be?  | ■ \$100,001-\$500,000 □ \$500,001-\$1 million  | \$50,000,001-\$100 million   | ☐ \$10,000,000,001-\$50 billion       |  |
| Pa  | rt 7: Sign Below  | □ \$500,001-\$1 million  | \$100,000,001-\$500 million  | ☐ More than \$50 billion              |  |
| га  | rt 7: Sign Below  |  |  |                                       |  |
| For | you   | correct.   | I I declare under penalty of perjury that the info   | ormation provided is true and         |  |
|     |   |  | pter 7, I am aware that I may proceed, if eligib<br>understand the relief available under each cha             | · · · · · · · · · · · · · · · · · · · |  |
|     |   | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |  |                                       |  |
|     |   | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.   |  |                                       |  |
|     |   | _  | ment, concealing property, or obtaining money<br>in fines up to \$250,000, or imprisonment for und<br>ad 3571. |                                       |  |
|     |   | ★ /s/ Arnell Bryant  | ×  |                                       |  |
|     |   | Signature of Debtor 1  |  | ature of Debtor 2                     |  |
|     |   | Executed on09/23/201   | 6 Exec   | uted on                               |  |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 7 of 55

Debtor 1 Arnell Bryant Case Number (if known) \_\_\_\_\_\_

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Christopher Michael Dyer   | Date     | Date: 09/27/2016            |           |  |
|----------------------------------|----------|-----------------------------|-----------|--|
| Signature of Attorney for Debtor | Date     | MM / DD / YYYY              |           |  |
| Christopher Michael Dyer         |          |                             |           |  |
| Printed name                     |          |                             |           |  |
| Geraci Law L.L.C.                |          |                             |           |  |
| Firm name                        |          |                             |           |  |
| 55 E. Monroe St., #3400          |          |                             |           |  |
| Number Street                    |          |                             |           |  |
| Chicago                          | IL       | 60603                       |           |  |
| City                             | State    | ZIP Code                    |           |  |
| Contact Phone312-332-1800        | Email ad | <sub>ddress</sub> ndil@gera | cilaw.com |  |
| 6308928                          | IL       |                             |           |  |
| Bar number                       | State    |                             |           |  |

#### 

| Fill in this in           | formation to ide | entify your case:                       |                      |
|---------------------------|------------------|---|----------------------|
| Debtor 1                  | Arnell           |   | Bryant               |
|                           | First Name       | Middle Name                             | Last Name            |
| Debtor 2                  |                  |   |                      |
| (Spouse, if filing)       | First Name       | Middle Name                             | Last Name            |
| United States             | Bankruptcy Court | for the : <u>NORTHERN</u> District of _ | ILLINOIS_<br>(State) |
| Case Number<br>(If known) | -                |   | _                    |

# Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets  |                                    |
|--|------------------------------------|
|  | Your assets Value of what you own  |
| Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B   | <u> </u>                           |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$ 1,350                           |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$ 1,350                           |
|  |                                    |
| Part 2: Summarize Your Liabilities   |                                    |
|  | Your liabilities<br>Amount you owe |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol> | \$0                                |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | \$201                              |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$100,321                          |
|  |                                    |
| Part 3: Summarize Your Liabilities   |                                    |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$2,240.55                         |
| Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J  | \$2,232.00                         |

Document Bryant Page 9 of 55

Case Number (if known) \_\_\_\_

**EntriesDescription LiabilitiesAmount** <u>AssetsAmount</u> **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 2,972.67 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 of Schedule E/F, copy the following: \$\_0.00 9a. Domestic support obligations (Copy line 6a.) \$ 201.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ 0.00 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$\_ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$<u>201</u>.00 9g. Total. Add lines 9a through 9f.

Arnell

First Name

Middle Name

Debtor 1

|  | Caso 10   | 6 20716 Doc 1   | Filad 00/27/16   | Entered 09/27/16 14:35  | :32 Des    | sc Main   |         |
|--|---|---|--|---|------------|---|---------|
| Fill in this in  | formation to ide  | ntify your case and this filin  |  | 0 of 55   |            |   |         |
| Debtor 1   | Arnell  |   | Bryant   |   |            |   |         |
| Dobtor 2   | First Name  | Middle Name   | Last Name  |   |            |   |         |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name   | Last Name  |   |            |   |         |
| United States  | Bankruptcy Court f                                      | or the : <u>NORTHERN</u> Distric  |  |   |            |   |         |
| Case Number  |   |   | (State)  |   | [          | Check if this is  | an      |
| (If known)   | 10CA  | /D  |  |   |            | amended filing  | 1       |
|  | orm 106A  |   |  |   |            |   |         |
| n each category<br>ategory where<br>esponsible for<br>ages, write you            | you think it fits<br>supplying corre<br>ur name and cas | t and describe items. List ar<br>best. Be as complete and a<br>ect information. If more space<br>se number (if known). Answ | ccurate as possible. If two made is needed, attach a separat   | fits in more than one category, list the a<br>arried people are filing together, both ar<br>te sheet to this form. On the top of any a<br>we an Interest In | re equally |   | 12/15   |
|  | n or have any le  | egal or equitable interest in   | any residence, building, land                                  | , or similar property?  |            |   |         |
| No.  | Describe  |   |  |   |            |   |         |
| 2. Add the doll  | ar value of the p                                       | -   | ur entries fro Part 1, includir                                |   |            |   |         |
| you have at  | tached for Part   | 1. Write that number here   |  | >   |            |   | \$0.00  |
| Part 2:  | escribe Your Ve   | hicles  |  |   |            |   |         |
| you own that so  03. Cars, vans  No.  Yes.  04. Watercraft  Examples:  No.  Yes. | Describe Describe Describe Describe Describe            | homes, ATVs and other rectors, personal watercraft, fishing v   | o report it on Schedule G: Ex                                  | accessories   |            |   |         |
|  | -   | 2. Write that number here   | ur chares no r art 2, moraum                                   | >   |            |   | \$ 0.00 |
| Part 3:  | escribe Your Pe   | rsonal and Household Items  |  |   |            |   |         |
| Do you own or  | have any legal  | or equitable interest in any  | of the following items?  |   |            | Current value of to portion you own? Do not deduct secure or exemptions | ?       |
|  | l goods and furr<br>Major appliances, 1                 | nishings<br>furniture, linens, china, kitchenwa   | re   |   |            |   |         |
| Yes.   | Describe  | Furniture, small appliances, 2 b  | eds  |   | \$600      | \$  | 600.00  |
|  | Televisions and rac                                     | dios; audio, video, stereo, and dio including cell phones, cameras,   | gital equipment; computers, printer<br>media players, games    | s, scanners; music  |            |   |         |
| Yes.   | Describe  | 2 Flat screen TVs, stereo, cell p   | phone  |   | \$300      | \$  | 300.00  |
|  | Antiques and figuri                                     | nes; paintings, prints, or other art  | work; books, pictures, or other art<br>norabilia, collectibles | objects;  |            |   |         |
| Yes.   | Describe  |   |  |   |            | \$  | 0.00    |

Official Form 106A/B Record # 711893 Schedule A/B: Property Page 1 of 6

Filed 09/27/16

Bryant
Document
Last Name Case 16-30716 Entered 09/27/16 14:35:32 Page 11 of 55 umber (if known) Doc 1 <u>Arne</u>ll

Debtor 1

First Name

Middle Name

Desc Main

| 09. Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments  No.  |  |
|---|--|
| Yes. Describe   | \$ 0.00  |
| 10. Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No.   |  |
| Yes. Describe   | \$ 0.00  |
| 11. Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No.  |  |
| Yes. Describe  Everyday clothes, shoes, accessories  \$200  | \$ 200.00  |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver  No.  | <u> </u>   |
| Yes. Describe  Everyday jewelry, costume jewelry \$100  | \$ 100.00  |
| 13. Non-farm animals  Examples: Dogs, cats, birds, horses  No.  |  |
| Yes. Describe   | \$ <u> </u>  |
| 14. Any other personal and household items you did not already list, including any health aids you did not list  No.  |  |
| Yes. Describe  Books, CDs, DVDs & Family Photos \$100   | \$ 100.00  |
| 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached  | \$1,300.00   |
| for Part 3. Write that number here>   |  |
| Part 4: Describe Your Financial Assets  |  |
| Do you own or have any legal or equitable interest in any of the following?   | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 16. Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition  No.  |  |
| Yes. Describe   | \$ 0.00  |
| <ul> <li>17. Deposits of money</li> <li>Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.</li> <li>No.</li> </ul> | ·  |
| Yes. Describe Account Type: Institution name:  Checking Account Great Lakes Credit Union  | <u>\$</u> 50.00  |
| 18. Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts  No.  | \$ <u>50.0</u> 0   |
| Yes. Describe Institution or issuer name:   | \$ 0.00  |
| 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in No.   | <u> </u>   |
| Yes. Describe Name of Entity and Percent of Ownership:  |  |

Case 16-30716 Filed 09/27/16

Document

Last Name Doc 1 Desc Main <u>Arne</u>ll Debtor 1 Middle Name

First Name

Entered 09/27/16 14:35:32 Page 12 of 55 umber (if known)

| 20. | Governme                  | nt and corporate                    | e bonds and other negotiable and non-negotiable instruments   |  |          |
|-----|---------------------------|-------------------------------------|---|--|----------|
|     | -                         |                                     | e personal checks, cashiers' checks, promissory notes, and money orders. re those you cannot transfer to someone by signing or delivering them. |  |          |
|     | Yes.                      | Describe                            | Issuer name:  | \$   | 0.00     |
| 21. |                           | or pension acc                      | counts RISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans   |  |          |
|     | Yes.                      | Describe                            | Type of account and Institution name:   | \$   | 0.00     |
| 22. | -                         | eposits and pre                     | payments sits you have made so that you may continue service or use from a company  | Ψ  |          |
|     |                           | •                                   | andlords, prepaid rent, public utilities (electric, gas, water), telecommunications   |  |          |
|     | Yes.                      | Describe                            | Institution name or individual:   | •  | 0.00     |
| 23. | Annuities (               | A contract for a                    | periodic payment of money to you, either for life or for a number of years)   | <u> </u>   |          |
|     | Yes.                      | Describe                            | Issuer name and description:  | •  | 0.00     |
| 24. |                           | an education I<br>§ 530(b)(1), 529A | RA, in an account in a qualified ABLE program, or under a qualified state tuition program. (b), and 529(b)(1).                                  | <b>\$</b>  | <u> </u> |
|     | Yes.                      | Describe                            | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):  | ¢  | 0.00     |
| 25. | Trusts, equ               | iitable or future                   | interests in property (other than anything listed in line 1), and rights or powers  | Φ  | <u> </u> |
|     | Yes.                      | Describe                            |   | \$   | 0.00     |
| 26. |                           |                                     | marks, trade secrets, and other intellectual property mes, websites, proceeds from royalties and licensing agreements                           |  |          |
|     | Yes.                      | Describe                            |   | \$   | 0.00     |
| 27. |                           |                                     | other general intangibles xclusive licenses, cooperative association holdings, liquor licenses, professional licenses                           | -  |          |
|     | Yes.                      | Describe                            |   | \$   | 0.00     |
| Moi | ney or propo              | erty owed to yo                     | u?  | Current value of the portion you own?  Do not deduct secured or exemptions |          |
| 28. | Tax refund                | s owed to you                       |   |  |          |
|     | Yes.                      | Describe                            |   | \$   | 0.00     |
| 29. | Family sup<br>Examples: I | -                                   | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement  | <u> </u>   |          |
|     | Yes.                      | Describe                            |   | \$   | 0.00     |
| 30. | Examples: I               |                                     | bwes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, id loans you made to someone else      |  |          |
|     | Yes.                      | Describe                            |   | \$   | 0.00     |

Case 16-30716 Doc 1 <u>Arne</u>ll Debtor 1

Filed 09/27/16

Bryant
Document
Last Name Entered 09/27/16 14:35:32 Page 13 of 55 umber (if known) Desc Main First Name Middle Name

| 31. Interest in insurance policies  |   |  |
|---|---|--|
|   | surance; health savings account (HSA); credit, homeowner's, or renter's insurance<br>pany Name & Beneficiary:   |  |
| Yes. Describe   | valle & Deficiolary.  | 1  |
| Unite   | d Insurance Term Life Insurance Policy, Dependent Daughter is the Beneficiary. \$0  | \$ 0.00  |
| 32. Any interest in property that is o  | due you from someone who has died   | ş <u>0.0</u> 0   |
|   | rust, expect proceeds from a life insurance policy, or are currently entitled to receive  |  |
| property because someone has died No.   |   |  |
| Yes. Describe   |   | 1  |
|   |   | \$0 <u>.0</u> 0  |
|   | ether or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue  |  |
| No.   | speces, insurance dains, or rights to suc   |  |
| Yes. Describe   |   | 1  |
|   |   | \$0.00   |
| No.   | ed claims of every nature, including counterclaims of the debtor and rights   |  |
| Yes. Describe   |   | 1  |
|   |   | \$0.00   |
| 35. Any financial assets you did not  | t already list  |  |
| No.  Yes. Describe  |   | 1  |
| Tes. Describe   |   | \$0.00   |
|   |   | -  |
| ļ   | r entries from Part 4, including any entries for pages you have attached  | \$50.00  |
| for Part 4. Write that number her   | e>  |  |
| Part 5  | Related Property You Own or Have an Interest In. List any real estate in Part 1.  |  |
| 97. Da an bassa and land a  | r equitable interest in any business-related property?  |  |
| 37. Do you own or nave any legal of   | equitable interest in any business-related property:  |  |
| No.   | equitable litterest in any business-related property:   |  |
|   | equitable interest in any business-related property:  |  |
| No.   | equitable interest in any business-related property:  | Current value of the   |
| No.   | equitable interest in any business-related property :   | Current value of the portion you own?  Do not deduct secured claims    |
| No. Yes.  |   | portion you own?   |
| No. Yes.  38. Accounts receivable or commis   |   | portion you own? Do not deduct secured claims                          |
| No.  Yes.  38. Accounts receivable or commis  No.   |   | portion you own? Do not deduct secured claims                          |
| No.  Yes.  38. Accounts receivable or commis  No.   |   | portion you own? Do not deduct secured claims                          |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  | sions you already earned  | portion you own? Do not deduct secured claims or exemptions            |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  | sions you already earned  | portion you own? Do not deduct secured claims or exemptions            |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  Examples: Business-related compute  | sions you already earned  | portion you own? Do not deduct secured claims or exemptions            |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  Examples: Business-related compute  No.  Yes. Describe  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | portion you own? Do not deduct secured claims or exemptions            |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  Examples: Business-related compute  No.  Yes. Describe  40. Machinery, fixtures, equipment,   | sions you already earned  | portion you own? Do not deduct secured claims or exemptions  \$        |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  Examples: Business-related compute  No.  Yes. Describe  40. Machinery, fixtures, equipment,  No.  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | portion you own? Do not deduct secured claims or exemptions  \$        |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  Examples: Business-related compute  No.  Yes. Describe  40. Machinery, fixtures, equipment,   | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | portion you own? Do not deduct secured claims or exemptions  \$        |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  Examples: Business-related compute  No.  Yes. Describe  40. Machinery, fixtures, equipment,  No.  Yes. Describe  41. Inventory  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | portion you own? Do not deduct secured claims or exemptions  \$        |
| No. Yes.  38. Accounts receivable or commis No. Yes. Describe  39. Office equipment, furnishings, a Examples: Business-related compute No. Yes. Describe  40. Machinery, fixtures, equipment, No. Yes. Describe  41. Inventory No.  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | portion you own? Do not deduct secured claims or exemptions  \$        |
| No.  Yes.  38. Accounts receivable or commis  No.  Yes. Describe  39. Office equipment, furnishings, a  Examples: Business-related compute  No.  Yes. Describe  40. Machinery, fixtures, equipment,  No.  Yes. Describe  41. Inventory  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | portion you own? Do not deduct secured claims or exemptions  \$        |
| No. Yes.  38. Accounts receivable or commis No. Yes. Describe  39. Office equipment, furnishings, a Examples: Business-related compute No. Yes. Describe  40. Machinery, fixtures, equipment, No. Yes. Describe  41. Inventory No.  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  supplies you use in business, and tools of your trade   | portion you own? Do not deduct secured claims or exemptions  \$        |
| No. Yes.  38. Accounts receivable or commis No. Yes. Describe  39. Office equipment, furnishings, a Examples: Business-related compute No. Yes. Describe  40. Machinery, fixtures, equipment, No. Yes. Describe  41. Inventory  No. Yes. Describe  42. Interests in partnerships or joint No. Name  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  supplies you use in business, and tools of your trade   | portion you own? Do not deduct secured claims or exemptions  \$        |
| No. Yes.  38. Accounts receivable or commis No. Yes. Describe  39. Office equipment, furnishings, a Examples: Business-related compute No. Yes. Describe  40. Machinery, fixtures, equipment, No. Yes. Describe  41. Inventory  No. Yes. Describe  42. Interests in partnerships or join  | sions you already earned  and supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  supplies you use in business, and tools of your trade   | portion you own?     Do not deduct secured claims or exemptions     \$ |
| No. Yes.  38. Accounts receivable or commis No. Yes. Describe  39. Office equipment, furnishings, a Examples: Business-related compute No. Yes. Describe  40. Machinery, fixtures, equipment, No. Yes. Describe  41. Inventory  No. Yes. Describe  42. Interests in partnerships or joint No. Name  | sions you already earned  and supplies  ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  supplies you use in business, and tools of your trade  t ventures  e of Entity and Percent of Ownership: | portion you own? Do not deduct secured claims or exemptions  \$        |
| No. Yes.  38. Accounts receivable or commis No. Yes. Describe  39. Office equipment, furnishings, a Examples: Business-related compute No. Yes. Describe  40. Machinery, fixtures, equipment, No. Yes. Describe  41. Inventory No. Yes. Describe  42. Interests in partnerships or join No. Name Yes. Describe  | sions you already earned  and supplies  ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  supplies you use in business, and tools of your trade  t ventures  e of Entity and Percent of Ownership: | portion you own?     Do not deduct secured claims or exemptions     \$ |
| No. Yes.  38. Accounts receivable or commismo. No. Yes. Describe  39. Office equipment, furnishings, a Examples: Business-related computement, No. Yes. Describe  40. Machinery, fixtures, equipment, No. Yes. Describe  41. Inventory No. Yes. Describe  42. Interests in partnerships or join No. Name Yes. Describe  43. Customer lists, mailing lists, or | sions you already earned  and supplies  ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  supplies you use in business, and tools of your trade  t ventures  e of Entity and Percent of Ownership: | portion you own?     Do not deduct secured claims or exemptions     \$ |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 14 of 55

44. Any business-related property you did not already list Nο Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ..... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Yes Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 for Part 6. Write that number here ----Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... Yes. 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... -->

Case 16-30716 Desc Main Doc 1 <u>Arne</u>ll

Filed 09/27/16 Entered 09/27/16 14:35:32

Document Page 15 of 5 the street of the stre Debtor 1 First Name Middle Name

| Part 8: List the Totals of Each Part of this Form                       |             |             |
|---|-------------|-------------|
| 55. Part 1: Total real estate, line 2                                   |             | \$ 0.00     |
| 56. Part 2: Total vehicles, line 5                                      | \$ 0.00     |             |
| 57. Part 3: Total personal and household items, line 15                 | \$ 1,300.00 |             |
| 58. Part 4: Total financial assets, line 36                             | \$ 50.00    |             |
| 59. Part 5: Total business-related property, line 45                    | \$ 0.00     |             |
| 60. Part 6: Total farm- and fishing-related property, line 52           | \$ 0.00     |             |
| 61. Part 7: Total other property not listed, line 54                    | \$ 0.00     |             |
| 62. <b>Total personal property.</b> Add lines 56 through 61             | \$ 1,350.00 | \$ 1,350.00 |
| 63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62 |             | \$1,350.00  |

Record # 711893 Page 6 of 6 Official Form 106A/B Schedule A/B: Property

| Fill in this in     | formation to ider   | ntify your case:                       |                     |
|---------------------|---------------------|--|---------------------|
| Debtor 1            | Arnell              | Bryant                                 |                     |
|                     | First Name          | Middle Name                            | Last Name           |
| Debtor 2            |                     |  |                     |
| (Spouse, if filing) | First Name          | Middle Name                            | Last Name           |
| United States       | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of _ | ILLINOIS<br>(State) |
| Case Number         | r                   |  | _                   |
| (If known)          |                     |  |                     |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|                         | iming state and federal nonbankrupt                     |                                      | § 522(b)(3)   |                                      |
|-------------------------|---|--------------------------------------|---|--------------------------------------|
| You are cla             | iming federal exemptions. 11 U.S.C.                     | § 522(b)(2)                          |   |                                      |
| For any proper          | ty you list on <i>Schedule A/B</i> that yo              | u claim as exempt, fill in t         | the information below.  |                                      |
| •                       | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption   |
|                         |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                      |
| Brief<br>description:   | Furniture, small appliances, 2 beds                     | \$ <u>600</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$600.00     |
| Line from Schedule A/B: | 06  |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
| Brief<br>description:   | 2 Flat screen TVs, stereo, cell phone                   | \$_300                               | <b></b>   | 735 ILCS 5/12-1001(b) - \$300.00     |
| Line from Schedule A/B: | <u>07</u>   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
| Brief<br>description:   | Everyday clothes, shoes, accessories                    | \$_ 200                              | <b></b>   | 735 ILCS 5/12-1001(a),(e) - \$200.00 |
| Line from Schedule A/B: | 11  |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
| Brief<br>description:   | Everyday jewelry, costume jewelry                       | \$ <u>100</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$100.00     |
| Line from Schedule A/B: | 12  |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
|                         |   |                                      |   |                                      |

Last Name

Debtor 1 Arnell Middle Name

First Name

Document Page 17 of 55 Page Number (if known)

|   | Part 2: Additional Page |  |                                      |   |                                    |  |  |
|---|-------------------------|--|--------------------------------------|---|------------------------------------|--|--|
|   |                         | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |
|   |                         |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |
|   | Brief description:      | Books, CDs, DVDs & Family<br>Photos                    | \$_100                               | <b>\_</b> \$  | 735 ILCS 5/12-1001(a) - \$100.00   |  |  |
|   | Line from Schedule A/B: | 14   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|   | Brief description:      | Checking Account, Great Lakes<br>Credit Union, 50.00   | \$_50                                | <b></b>   | 735 ILCS 5/12-1001(b) - \$50.00    |  |  |
|   | Line from Schedule A/B: | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|   | Brief description:      | United Insurance Term Life Insurance Policy, Dependent | \$ <u> </u>                          | <b></b> \$  | 215 ILCS 5/238 - \$0.00            |  |  |
|   | Line from Schedule A/B: | Daughter is the Beneficiary.                           |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
| 2 | Ara vou claimin         | g a homestead exemption of mor                         | o than \$155 6752                    |   |                                    |  |  |
|   | (Subject to adjus       |  |                                      | n or after the date of adjustment .)                            |                                    |  |  |
|   | No.                     |  |                                      |   |                                    |  |  |
|   | Yes. Did you            | acquire the property covered by t                      | he exemption within 1,215 d          | ays before you filed this case?                                 |                                    |  |  |
|   | ☐ No                    |  |                                      |   |                                    |  |  |
|   | ☐ Yes.                  |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
|   |                         |  |                                      |   |                                    |  |  |
| 0 | fficial Form 106C       | Record # 711893  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 2 of 2                        |  |  |

| Fill in this i           | nformation to identi      |   | Eilad 00/27/16              | Entered 0<br>8 of    | 9/27/16 14:3            | 5:32        | Desc Main                |                   |
|--------------------------|---------------------------|---|-----------------------------|----------------------|-------------------------|-------------|--------------------------|-------------------|
|                          |                           | ., , ,  |                             | 0 01                 | 33                      |             |                          |                   |
| Debtor 1                 | Arnell                    |   | Bryant                      |                      |                         |             |                          |                   |
|                          | First Name                | Middle Name   | Last Name                   |                      |                         |             |                          |                   |
| Debtor 2                 |                           |   |                             |                      |                         |             |                          |                   |
| (Spouse, if filing)      | First Name                | Middle Name   | Last Name                   |                      |                         |             |                          |                   |
| United State             | s Bankruptcy Court for t  | he: <u>NORTHERN</u> District of                                     | <u>ILLINOIS</u>             |                      |                         |             |                          |                   |
| Onen Neumbe              |                           |   | (State)                     |                      |                         |             | Check if this            | s is an           |
| Case Numbe<br>(If known) | er                        |   | _                           |                      |                         |             | amended fi               | lina              |
| Official F               | 106D                      |   |                             |                      |                         |             |                          | 5                 |
| <u>Official F</u>        | orm 106D                  |   |                             |                      |                         |             |                          |                   |
| Schedule                 | D: Creditor               | s Who Have Clain  | ns Secured by I             | Property             |                         |             |                          | 12/15             |
|                          |                           | ossible. If two married peopl                                       |                             |                      |                         |             | 21                       |                   |
|                          |                           | and case number (if known)  |                             | illies, allu attacii | it to this form. On th  | ie top oi a | iiy                      |                   |
| 1. Do any cr             | editors have claims       | secured by your property?   |                             |                      |                         |             |                          |                   |
| No. C                    | heck this box and su      | bmit this form to the court with                                    | n vour other schedules. Yo  | ou have nothing els  | se to report on this fo | rm.         |                          |                   |
| _                        | ill in all of the informa |   | .,                          |                      |                         |             |                          |                   |
| 1es. F                   |                           | ation below.  |                             |                      |                         |             |                          |                   |
| Part 1:                  | List All Secured Clai     | ms  |                             |                      |                         |             |                          |                   |
|                          |                           |   |                             |                      | Column .                | A           | Column A                 | Column C          |
|                          |                           | reditor has more than one sec                                       | *                           | ' '                  | Amount                  | of claim    | Value of collateral      | Unsecured         |
|                          |                           | ne creditor has a particular cla<br>claims in alphabetical order ac | ,                           |                      | Do not de               |             | that supports this claim | portion<br>If any |
| AS IIIucii               | as possible, list the t   | dalins in alphabelical order ac                                     | cording to the creditors ha | airie.               | value of c              | collateral  | Ciaiiii                  | ii aiiy           |
|                          |                           |   |                             |                      |                         |             |                          |                   |
|                          |                           |   |                             |                      |                         |             |                          |                   |
|                          |                           |   |                             |                      |                         |             |                          |                   |
|                          |                           |   |                             |                      |                         |             |                          |                   |

| Fill i            | n this inf                                 | Case 16 20716 Dac  | 1 Filed 00/27/16 Enter  | ed 09/27/16 14:35:32<br>9 of 55   | Desc Mai                       | n                  |
|-------------------|--|--|---|---|--------------------------------|--------------------|
| Debt              | or 1                                       | Arnell   | Bryant  |   |                                |                    |
| 5.1.              |  | First Name Middle Name   | Last Name   |   |                                |                    |
| Debt<br>(Spous    | or 2<br>se, if filing)                     | First Name Middle Name   | Last Name   |   |                                |                    |
| Unite             | ed States                                  | Bankruptcy Court for the : <u>NORTHERN</u> D   | istrict of ILLINOIS   |   |                                |                    |
|                   |  |  | (State)   |   | Check                          | c if this is an    |
| (If kn            | Number                                     |  |   |   | <del>-</del>                   | ded filing         |
| Offic             | ial Fo                                     | orm 106E/F   |   |   |                                |                    |
|                   |  | E/F: Creditors Who Have  | e Unsecured Claims  |   |                                | 12/15              |
| reditor<br>eeded, | s with page of the copy the copy addition. | artially secured claims that are listed in   | , ,   | Secured by Property. If more space  | is                             |                    |
| 1. <b>Do</b>      | any cred                                   | ditors have priority unsecured claims a  | gainst you?   |   |                                |                    |
|                   | No. Go                                     | to Part 2.   |   |   |                                |                    |
|                   | Yes.                                       |  |   |   |                                |                    |
| eac               | ch claim                                   | listed, identify what type of claim it is. If a amounts. As much as possible, list the cla | tor has more than one priority unsecured cla<br>claim has both priority and nonpriority amou<br>aims in alphabetical order according to the c<br>lart 1. If more than one creditor holds a partic | nts, list that claim here and show both<br>editor's name. If you have more than | h priority and<br>two priority |                    |
| (Fo               | r an exp                                   | lanation of each type of claim, see the ins  | structions for this form in the instruction book  | let.)   |                                |                    |
|                   |  |  |   | Total claim   | Priority amount                | Nonpriority amount |
| 2.1 .             | Illinois D                                 | Department of Revenue  | Last 4 digits of account number   | <u>\$ 100.00</u>  | <u>\$ 100.00</u>               | \$_0.00            |
|                   | Creditor's N                               |  | When was the debt incurred? 2015  |   |                                |                    |
|                   | Number                                     | Street   |   |   |                                |                    |
|                   |  |  | As of the date you file, the claim is: Check a  | Il that apply.  |                                |                    |
|                   | Springfie                                  | eld IL 62794-9044  | Contingent  |   |                                |                    |
|                   | City                                       | State Zip Code   | Unliquidated Disputed   |   |                                |                    |
| W                 | ho owes  Debtor 1                          | the debt? Check one.   | Disputed  |   |                                |                    |
| F                 | Debtor 2                                   | •  | Type of PRIORITY unsecured claim:   |   |                                |                    |
| F                 | =  | I and Debtor 2 only  | Domestic support obligations  |   |                                |                    |
| F                 | =  | one of the debtors and another   | Taxes and certain other debts you owe the g   | overnment   |                                |                    |
| Ē                 | Check i                                    | if this claim relates to a   | _   |   |                                |                    |
| _                 |  | inity debt   | Claims for death or personal injury while you   | were  |                                |                    |
| ls                |  | n subject to offest?   | intoxicated   |   |                                |                    |
| F                 | No<br>Yes                                  |  | Other. Specify  |   |                                |                    |
|                   | 1163                                       |  |   |   |                                |                    |

| btor 1       | Case 16-30716 Doo  | : 1 Filed 09/27/16<br>Document                             | Entered 09/27/16<br>Page 20 of 55<br>Case Number (if | 14:35:32 [            | Desc Main        | _                  |
|--------------|--|--|--|-----------------------|------------------|--------------------|
|              | First Name Middle Name   | Last Name  |  |                       |                  |                    |
| Part         | Your PRIORITY Unsecured Claims - Continu   | ation Page   |  |                       |                  |                    |
| ter lis      | ting any entries on this page, number them be  | ginning with 2.3, followed by 2.4                          | 4, and so forth.                                     | Total claim           | Priority amount  | Nonpriority amount |
| 2.2          | IRS Priority Debt  | Last 4 digits of account number                            | er   | \$ <u>101.00</u>      | \$ <u>101.00</u> | \$ <u>0.00</u>     |
|              | Creditor's Name<br>PO Box 7346   | When was the debt incurred?                                | 2015   |                       |                  |                    |
|              | Number Street  |  |  |                       |                  |                    |
|              |  | As of the date you file, the clair                         | m is: Check all that apply.                          |                       |                  |                    |
|              | Philadelphia PA 19101  | Contingent   |  |                       |                  |                    |
|              | City State Zip Code  | Unliquidated Disputed                                      |  |                       |                  |                    |
| w            | ho owes the debt? Check one.   | Disputed   |  |                       |                  |                    |
| H            | Debtor 1 only Debtor 2 only  | Turns of BDIODITY are sourced a                            | daim.  |                       |                  |                    |
| F            | Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured of Domestic support obligations | aim:   |                       |                  |                    |
| F            | At least one of the debtors and another  | Taxes and certain other debts                              | you owe the government                               |                       |                  |                    |
| <br>         | Check if this claim relates to a   | Taxos and solian sales assis                               | you one the government                               |                       |                  |                    |
|              | community debt   | Claims for death or personal in                            | ijury while you were                                 |                       |                  |                    |
| ls           | the claim subject to offest?   | intoxicated  |  |                       |                  |                    |
|              | No   | Other. Specify   | <del> </del>   |                       |                  |                    |
|              | Yes  |  |  |                       |                  |                    |
| Part         | List All of Your NONPRIORITY Unsecured   | Claims   |  |                       |                  |                    |
| 3. <b>Do</b> | any creditors have nonpriority unsecured clain   | ns against vou?  |  |                       |                  |                    |
| _            |  |  |  |                       |                  |                    |
| ᆜ            | No. You have nothing to report in this part. Sub   | ornit triis form to the court with yo                      | ui other schedules.                                  |                       |                  |                    |
|              | Yes.   |  |  |                       |                  |                    |
|              | t all of your nonpriority unsecured claims in the  | •  |  |                       |                  |                    |
|              | priority unsecured claim, list the creditor separat  | <u>-</u>   | •  |                       | <u>-</u>         |                    |
|              | uded in Part 1. If more than one creditor holds a ms fill out the Continuation Page of Part 2. | particular claim, list the other cre                       | editors in Part 3.ir you nave more i                 | nan three nonpriority | unsecurea        |                    |
| Ciui         | in out the continuation rage of rart 2.  |  |  |                       |                  | Total claim        |
| 4.1 .        | AT T   | Last 4 digits of account number                            | 5093   |                       |                  | <b>\$</b> 1,242.00 |
| _            | Creditor's Name  |  | 0040 0040  |                       |                  |                    |
|              | 2703 N Highway 75  | When was the debt incurred?                                | 2010-2010  |                       |                  |                    |
|              | Number Street  |  |  |                       |                  |                    |
|              |  | As of the date you file, the claim                         | m is: Check all that apply.                          |                       |                  |                    |
|              | Shorman TV 75000   | Contingent   |  |                       |                  |                    |
|              | Sherman         TX         75090           City         State         Zip Code                 | Unliquidated   |  |                       |                  |                    |
|              | ho owes the debt? Check one.   | Disputed   |  |                       |                  |                    |
|              | Debtor 1 only  |  |  |                       |                  |                    |

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

Other. Specify Collecting for Creditor

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

Student loans

Debtor 2 only

No

Yes

Official Form 106E/F

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim relates to a community debt

Is the claim subject to offest?

|         |        | Casc 10-30710 | DUCI | 1 11CG 03/21/10 | LINCICA 03/21/10 14.00.02       | DC3C Mail |
|---------|--------|---------------|------|-----------------|---------------------------------|-----------|
| ebtor 1 | Arnell |               |      | <u> </u>        | Page 21 of 55 Number (if known) |           |

Last Name

| Pa      | Your NONPRIORITY Unsecured Claims - 0              | Continuation Page                      |                                |                    |
|---------|--|--|--------------------------------|--------------------|
| After I | isting any entries on this page, number them I     | beginning with 4.4, followed by 4.5, a | nd so forth.                   | Total Claim        |
| 4.2     | AT T   | Last 4 digits of account number _      | 9517                           | \$ <u>1,242.00</u> |
|         | Creditor's Name                                    |  | 2012 2014                      |                    |
|         | 8014 Bayberry Rd                                   | When was the debt incurred?            | 2013-2014                      |                    |
|         | Number Street                                      |  |                                |                    |
|         |  | As of the date you file, the claim is  | : Check all that apply.        |                    |
|         |  | Contingent                             |                                |                    |
|         | Jacksonville FL 32256                              | Unliquidated                           |                                |                    |
| ,       | City State Zip Code  Who owes the debt? Check one. | Disputed                               |                                |                    |
|         | Debtor 1 only                                      |  |                                |                    |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured          | claim:                         |                    |
|         | Debtor 1 and Debtor 2 only                         | Student loans                          |                                |                    |
|         | At least one of the debtors and another            | Obligations arising out of a separat   | tion agreement or divorce      |                    |
|         | Check if this claim relates to a                   | that you did not report as priority cl | aims                           |                    |
|         | community debt                                     | Debts to pension or profit-sharing p   | plans, and other similar debts |                    |
|         | s the claim subject to offest?                     |  |                                |                    |
|         | No Yes   | Other. Specify Collecting for C        | <u>Creditor</u>                |                    |
| 4.3     | City of Chicago/Dept. of Rev.                      | Last 4 digits of account number _      |                                | \$ <u>880.00</u>   |
|         | Creditor's Name                                    |  |                                |                    |
|         | 121 N. LaSalle St., Room 107A                      | When was the debt incurred?            |                                |                    |
|         | Number Street                                      |  |                                |                    |
|         |  | As of the date you file, the claim is  | : Check all that apply.        |                    |
|         |  | Contingent                             |                                |                    |
|         | Chicago IL 60602                                   | Unliquidated                           |                                |                    |
| Ι,      | City State Zip Code                                | Disputed                               |                                |                    |
|         | Who owes the debt? Check one.                      |  |                                |                    |
|         | Debtor 1 only                                      |  |                                |                    |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured          | claim:                         |                    |
|         | Debtor 1 and Debtor 2 only                         | Student loans                          |                                |                    |
|         | At least one of the debtors and another            | Obligations arising out of a separat   |                                |                    |
|         | Check if this claim relates to a                   | that you did not report as priority cl |                                |                    |
|         | community debt<br>Is the claim subject to offest?  | Debts to pension or profit-sharing p   | plans, and other similar debts |                    |
|         | No   | - Auto Assidant                        |                                |                    |
|         | Yes  | Other. Specify Auto Accident           | <del></del>                    |                    |
| 144     | Comcast  | Last 4 digits of account number        | 7223                           | <b>\$</b> 128.00   |
| 4.4     | Creditor's Name                                    |  |                                | <u> </u>           |
|         | 800 Sw 39Th St                                     | When was the debt incurred?            | 2015-2016                      |                    |
|         | Number Street                                      |  |                                |                    |
|         |  | A set the state was file that also be  | Olas I all II at a sal         |                    |
|         | <del></del>  | As of the date you file, the claim is  | : Cneck all that apply.        |                    |
|         | Renton WA 98057                                    | Contingent                             |                                |                    |
|         | City State Zip Code                                | Unliquidated                           |                                |                    |
| '       | Who owes the debt? Check one.                      | Disputed                               |                                |                    |
|         | Debtor 1 only                                      |  |                                |                    |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured          | claim:                         |                    |
|         | Debtor 1 and Debtor 2 only                         | Student loans                          |                                |                    |
|         | At least one of the debtors and another            | Obligations arising out of a separat   | tion agreement or divorce      |                    |
|         | Check if this claim relates to a                   | that you did not report as priority cl |                                |                    |
|         | community debt                                     | Debts to pension or profit-sharing p   | plans, and other similar debts |                    |
|         | No   | Other. SpecifyCollecting for C         | Creditor                       |                    |
|         | Yes  |  |                                |                    |

|          |        | Case 10-30/10 | DOC T | FIIEU 09/2//10 | Ellielen 03/27/10 14.33.32           | Desc Main |
|----------|--------|---------------|-------|----------------|--------------------------------------|-----------|
| Debtor 1 | Arnell |               |       | Bocument       | Page 22 of 55 Case Number (if known) |           |

Your NONPRIORITY Unsecured Claims - Continuation Page

| listing any entries on this page, number them be   | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim          |
|--|---|----------------------|
|  | Last 4 digits of account number                                   | <b>\$</b> 151.00     |
| Creditor's Name PO Box 551268                      | When was the debt incurred?                                       |                      |
| Number Street                                      |   |                      |
|  | As of the date you file, the claim is: Check all that apply.      |                      |
|  | Contingent  |                      |
| Jacksonville FL 32255                              | Unliquidated  |                      |
| City State Zip Code  Who owes the debt? Check one. | Disputed  |                      |
| Debtor 1 only                                      |   |                      |
| Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                      |
| Debtor 1 and Debtor 2 only                         | ☐ Student loans   |                      |
| At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                      |
| Check if this claim relates to a                   | that you did not report as priority claims                        |                      |
| community debt<br>s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts |                      |
| No   | Other Specify Debt Owed   |                      |
| Yes  | Other. Specify Debt Owed  |                      |
| GM Financial                                       | Last 4 digits of account number6716                               | <b>\$</b> _15,538.00 |
| Creditor's Name                                    | <del> </del>  |                      |
| Po Box 182963                                      | When was the debt incurred? 2014-03-04                            |                      |
| Number Street                                      |   |                      |
|  | As of the date you file, the claim is: Check all that apply.      |                      |
|  | Contingent  |                      |
| Arlington TX 76096                                 | Unliquidated  |                      |
| City State Zip Code                                | Disputed  |                      |
| Who owes the debt? Check one.                      | Disputed  |                      |
| Debtor 1 only                                      |   |                      |
| Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                      |
| Debtor 1 and Debtor 2 only                         | Student loans   |                      |
| At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                      |
| Check if this claim relates to a                   | that you did not report as priority claims                        |                      |
| community debt<br>s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts |                      |
| No   | Deficiency Developed Auto   |                      |
| ₹  | Other. Specify Deficiency, Repo'd/Surr'd Auto                     |                      |
| Yes Laboratory Corp. of America                    | Last 4 digits of account number                                   | <b>\$</b> 132.00     |
| Creditor's Name                                    | Last 4 digits of account number                                   | ¥ <u></u>            |
| PO Box 8015  | When was the debt incurred?                                       |                      |
| Number Street                                      |   |                      |
|  | As of the date way file the plains in Charles II that are he      |                      |
|  | As of the date you file, the claim is: Check all that apply.      |                      |
| Burlington NC 27216-8015                           | Contingent  |                      |
| City State Zip Code                                | Unliquidated  |                      |
| Who owes the debt? Check one.                      | Disputed  |                      |
| Debtor 1 only                                      |   |                      |
| Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                      |
| Debtor 1 and Debtor 2 only                         | Student loans   |                      |
| At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                      |
| Check if this claim relates to a                   | that you did not report as priority claims                        |                      |
| community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                      |
| s the claim subject to offest?                     |   |                      |
| No Voc   | Other. Specify Medical/Dental Services                            |                      |

Document Page 23 of 55
Case Number (if known) Arnell Debtor 1

| Pa      | Your NONPRIORITY Unsecured Claims - 0                               | Continuation Page  |                     |
|---------|---|--|---------------------|
| After I | isting any entries on this page, number them b                      | peginning with 4.4, followed by 4.5, and so forth.                             | Total Claim         |
| 4.8     | NCB Management Services Inc.  | Last 4 digits of account number  | <b>\$</b> 580.30    |
|         | Creditor's Name   |  |                     |
|         | PO Box 1099   | When was the debt incurred?  |                     |
|         | Number Street   |  |                     |
|         |   | As of the date you file, the claim is: Check all that apply.                   |                     |
|         | Langhorne PA 19047  | Contingent   |                     |
|         | City State Zip Code   | Unliquidated   |                     |
| ,       | Who owes the debt? Check one.                                       | Disputed   |                     |
|         | Debtor 1 only   |  |                     |
|         | Debtor 2 only   | Type of NONPRIORITY unsecured claim:   |                     |
|         | Debtor 1 and Debtor 2 only  | Student loans  |                     |
|         | At least one of the debtors and another                             | Obligations arising out of a separation agreement or divorce                   |                     |
|         | Check if this claim relates to a                                    | that you did not report as priority claims                                     |                     |
|         | community debt  | Debts to pension or profit-sharing plans, and other similar debts              |                     |
|         | s the claim subject to offest?                                      |  |                     |
|         | No No   | Other. Specify Credit Extended to Debtor(s)                                    |                     |
| 4.9     | Yes Santander Consumer USA  | Last 4 digits of account number 1000   | <b>\$</b> 7,169.00  |
| 4.5     | Creditor's Name   | Luci 4 digito di doccum mumbon   | *                   |
|         | Po Box 961245   | When was the debt incurred? 2007-08-06   |                     |
|         | Number Street   |  |                     |
|         |   | As of the date you file, the claim is: Check all that apply.                   |                     |
|         |   | Contingent   |                     |
|         | Ft Worth TX 76161   | Unliquidated   |                     |
| Ι,      | City State Zip Code  Who owes the debt? Check one.                  | Disputed   |                     |
|         | Debtor 1 only   |  |                     |
|         | Debtor 2 only   | Type of NONPRIORITY unsecured claim:   |                     |
|         | Debtor 1 and Debtor 2 only  | Student loans  |                     |
|         | At least one of the debtors and another                             | Obligations arising out of a separation agreement or divorce                   |                     |
|         | Check if this claim relates to a                                    | that you did not report as priority claims                                     |                     |
| '       | community debt  | Debts to pension or profit-sharing plans, and other similar debts              |                     |
|         | s the claim subject to offest?                                      |  |                     |
|         | No  | Other. SpecifyDeficiency, Repo'd/Surr'd Auto                                   |                     |
|         | Yes Select Portfolio Svcin  | Last 4 digits of account number 8425   | <b>\$</b> 69,548.00 |
| 4.10    | Creditor's Name   | Last 4 digits of account number 8425   | \$ 09,340.00        |
|         | Po Box 65250  | When was the debt incurred? 2004-2013  |                     |
|         | Number Street   |  |                     |
|         |   | As of the date you file, the claim is: Check all that apply.                   |                     |
|         |   | Contingent   |                     |
|         | Salt Lake City UT 84165   | Unliquidated   |                     |
| Ι.      | City State Zip Code   | Disputed   |                     |
|         | Who owes the debt? Check one.                                       | Disputed   |                     |
|         | Debtor 1 only   | T. (NONDRODIE)   |                     |
|         | Debtor 2 and Debtor 2 and   | Type of NONPRIORITY unsecured claim:   |                     |
|         | Debtor 1 and Debtor 2 only  At least one of the debtors and another | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce |                     |
|         | =   | that you did not report as priority claims                                     |                     |
|         | Check if this claim relates to a community debt                     | Debts to pension or profit-sharing plans, and other similar debts              |                     |
|         | s the claim subject to offest?                                      |  |                     |
|         | No  | Other. Specify Mortgage Deficiency   |                     |
|         | T <sub>Ves</sub>  |  |                     |

| Debtor 1 | Arnell  | Document Page 24 of 55 Case Number (if known)   |                    |  |  |  |  |
|----------|---|---|--------------------|--|--|--|--|
| 4.11     | First Name Middle Name Tate & Kirlin Associates                               | Last 4 digits of account number   | \$ <u>3,711.16</u> |  |  |  |  |
|          | Creditor's Name  2810 Southampton Rd.  Number Street                          | When was the debt incurred?   |                    |  |  |  |  |
|          | Number   Street   | As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed                |                    |  |  |  |  |
|          | Debtor 1 only   |   |                    |  |  |  |  |
|          | Debtor 2 only  Debtor 1 and Debtor 2 only                                     | Type of NONPRIORITY unsecured claim: Student loans  |                    |  |  |  |  |
| [        | At least one of the debtors and another                                       | Obligations arising out of a separation agreement or divorce  |                    |  |  |  |  |
| ls       | Check if this claim relates to a community debt sthe claim subject to offest? | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |                    |  |  |  |  |
|          | No<br>Yes_  | Other. Specify Credit Extended to Debtor(s)   |                    |  |  |  |  |
| Part     | Rant 8: List Others to Be Notified for a Debt That You Already Listed         |   |                    |  |  |  |  |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 25 of 55

Debtor 1 Arnell

Middle Nam

Last Name

Part 4:

Add the Amounts for Each Type of Unsecured Claim

| Add the univ                | ounts for each type of unsecured claim.   |     |             |
|-----------------------------|---|-----|-------------|
|                             |   |     | Total claim |
| otal claims<br>rom Part 1   | 6a. Domestic support obligations  | 6a. | \$0.        |
|                             | 6b. Taxes and Certain other debts you owe the government  | 6b. | \$201.      |
|                             | 6c. Claims for death or personal injury while you were intoxicated  | 6c. | \$0.        |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d. | \$0.        |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e. | \$201.      |
|                             |   |     | Total claim |
| Total claims<br>from Part 2 | 6f. Student loans   | 6f. | \$0.        |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.        |
|                             | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$0.0       |
|                             | 6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$100,321.  |
|                             | 6j. <b>Total.</b> Add lines 6f through 6i.  | 6j. | \$100,321.4 |

| Fil               | l in this in                                      | Caco 16<br>formation to iden   | tify your case:  | Filod 00/27/16  | Entered 09/27/16 14<br>6 of 55  | 4:35:32  | Desc Main                          |       |
|-------------------|---|--|--|---|---|--|------------------------------------|-------|
| De                | ebtor 1   | Arnell   |  | Bryant  |   |  |                                    |       |
|                   |   | First Name   | Middle Name  | Last Name   |   |  |                                    |       |
|                   | ebtor 2<br>ouse, if filing)                       | First Name   | Middle Name  | Last Name   |   |  |                                    |       |
| Ur                | nited States                                      | Bankruptcy Court for   | r the : <u>NORTHERN</u> Distri   |   |   |  | _                                  |       |
|                   | ase Number<br>known)                              |  |  | (State)   |   |  | Check if this is ar amended filing | 1     |
| Offi              | cial Fo   | orm 106G   |  |   |   |  | amonada ming                       |       |
|                   |   |  | ory Contracts a  | and Unexpired Lea   | ses   |  |                                    | 12/15 |
| nformadditi  1. D | nation. If nonal pages o you hav No. Ch Yes. Fill | nore space is needs, write your name eany executory of each this box and so in all of the informely each person of | ded, copy the additional e and case number (if kn contracts or unexpired lesubmit this form to the countration below even if the countracts or company with whom y | page, fill it out, number the erown).  ases?  It with your other schedules. Your other are listed in our have the contract or lease | are equally responsible for supportries, and attach it to this page. On the support of the schedule A/B: Property (Official Formula of the state what each contract or suction booklet for more examples of | On the top of any<br>his form.<br>form 106A/B) | or                                 |       |
|                   | nexpired le                                       |  | nom you have the contrac   | ct or lease   | State what the co   | entract or lease                               | is for                             |       |
| 2.1               |   |  |  |   |   |  |                                    |       |
|                   | Name  |  |  |   |   |  |                                    |       |
|                   | Number  | Street   |  |   |   |  |                                    |       |
|                   | City  |  | State  | e Zip Code  |   |  |                                    |       |
| 2.2               |   |  |  |   |   |  |                                    |       |
|                   | Name  |  |  |   |   |  |                                    |       |
|                   | Number  | Street   |  |   |   |  |                                    |       |
|                   | City  |  | State  | e Zip Code  |   |  |                                    |       |
| 2.3               |   |  |  |   |   |  |                                    |       |
|                   | Name  |  |  |   |   |  |                                    |       |
|                   | Number  | Street   |  |   |   |  |                                    |       |
|                   | City  |  | Stat   | e Zip Code  |   |  |                                    |       |
| 2.4               |   |  |  |   |   |  |                                    |       |
|                   | Name  |  |  |   |   |  |                                    |       |
|                   | Number  | Street   |  |   |   |  |                                    |       |
|                   | City  |  | State  | e Zip Code  |   |  |                                    |       |
| 2.5               |   |  |  |   |   |  |                                    |       |
|                   | Name  |  |  |   |   |  |                                    |       |
|                   | Number  | Street   |  |   |   |  |                                    |       |

State Zip Code

City

| Fill in this in            | formation to iden | tify your case:                       |                  |
|----------------------------|-------------------|---------------------------------------|------------------|
| Debtor 1                   | Arnell            |                                       | Bryant           |
|                            | First Name        | Middle Name                           | Last Name        |
| Debtor 2                   |                   |                                       |                  |
| (Spouse, if filing)        | First Name        | Middle Name                           | Last Name        |
| United States  Case Number |                   | r the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |
| (If known)                 |                   |                                       |                  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| ny Ad            | Iditional Pages, write your name and case r  |   |  |  |
|------------------|--|---|--|--|
| 1. <b>D</b> o    | you have any codebtors? (If you are filing a   | a joint case, do not list either spo  | use as a codebtor.)                        |  |
|                  | No.  |   |  |  |
|                  | Yes  |   |  |  |
|                  | ithin the last 8 years, have you lived in a co<br>izona, California, Idaho, Lousiiana, Nevada, I   | • • • •   | • .  | • •  |
|                  | No. Go to line 3.  |   |  |  |
|                  | Yes. Did your spouse, former spouse, or le   | egal equivalent live with you at the  | e time?                                    |  |
|                  | Yes. Inwhich community state or territ   | tory did you live?  | Fill in the r                              | name and current address of that person.   |
|                  | Name of your spouse, former spouse or legal equiv  | alent   |  |  |
|                  | Number Street  |   | <del></del>                                |  |
|                  | City   | State   | Zip Code                                   |  |
| sh<br>Sc         | Column 1, list all of your codebtors. Do not nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/F   | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch          | gner. Make sure yo                         | ou have listed the creditor on   |
| sh<br>Sc<br>Sc   | own in line 2 again as a codebtor only if the  | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch          | gner. Make sure yo                         | ou have listed the creditor on form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  |
| sh<br>Sc<br>Sc   | nown in line 2 again as a codebtor only if the<br>chedule D (Official Form 106D), Schedule E/<br>chedule E/F, or Schedule G to fill out Colum  | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch          | gner. Make sure yo                         | ou have listed the creditor on orm 106G). Use Schedule D,  |
| sh<br>Sc<br>Sc   | nown in line 2 again as a codebtor only if the<br>chedule D (Official Form 106D), Schedule E/<br>chedule E/F, or Schedule G to fill out Colum  | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch          | gner. Make sure yo                         | ou have listed the creditor on orm 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  |
| sh<br>Sc<br>Sc   | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/chedule E/F, or Schedule G to fill out Column Column 1: Your codebtor                            | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch          | gner. Make sure yo                         | Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line   |
| sh<br>Sc<br>Sc   | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/chedule E/F, or Schedule G to fill out Column Column 1: Your codebtor                            | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch          | gner. Make sure yo                         | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line  |
| sh<br>Sc<br>Sc   | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/chedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street  City | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch<br>in 2. | gner. Make sure yc<br>edule G (Official Fo | Column 2: The creditor to whom you owe the debt  Check all schedule D,   Schedule D, line  Schedule E/F, line  |
| sh<br>Sc<br>Sc   | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/chedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street       | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch<br>in 2. | gner. Make sure yc<br>edule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line  |
| sh<br>Sc<br>Sc   | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/chedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street  City | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch<br>in 2. | gner. Make sure yc<br>edule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line   |
| sh Sc Sc Sc 33.1 | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/chedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street  City | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch<br>in 2. | gner. Make sure yc<br>edule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line  |
| sh Sc Sc Sc 33.1 | Name  Number Street  City  Name  Number Street  City   | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch<br>In 2. | gner. Make sure yo<br>edule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule B, line Schedule B, line Schedule D, line   |
| sh<br>Sc<br>Sc   | Name  Number Street  Number Street  Number Street  Number Street   | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch<br>In 2. | gner. Make sure yo<br>edule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line  |
| sh Sc Sc Sc 33.1 | Name  Number Street  City  Name  Number Street  City   | at person is a guarantor or cosi<br>F (Official Form 106E/F), or Sch<br>In 2. | gner. Make sure yo<br>edule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line |

Official Form 106H Record # 711893 Schedule H: Your Codebtors Page 1 of 1

Page 28 of 55 Document Fill in this information to identify your case: Debtor 1 Arnell **Bryant** Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the : NORTHERN DISTRICT OF ILLINOIS Case Number Check if this is: (If known) An amended filing A supplement showing post-petition chapter 13 income as of the following date: Official Form 106I MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information If you have more than one job, attach a separate page with **Employed** Employed **Employment status** information about additional Not employed Not employed employers. Include part-time, seasonal, or self-employed work. Occupation Maintenance Occupation may Include student or homemaker, if it applies. **Employers** name **Total Maintenance Cleaning Employers address** 615 Wheat Lane, Ste C Wood Dale, IL 60191 How long employed there? 17 years Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary and commissions (before all payroll \$0.00 \$2,972.67 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. \$0.00 \$0.00 Calculate gross income. Add line 2 + line 3. \$2.972.67 \$0.00

 Official Form 106I
 Record # 711893
 Schedule I: Your Income
 Page 1 of 2

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 29 of 55

Case Number (if known) \_

Arnell

Debtor 1

First Name Middle Name Last Name

For Debtor 1 For Debtor 2 or non-filing spouse \$2,972.67 \$0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$660.62 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. \$0.00 \$0.00 5e. Insurance 5f. Domestic support obligations 5f \$0.00 \$0.00 5g. Union dues \$71.50 \$0.00 5q. 5h. Other deductions. Specify: 5h. \$0.00 \$0.00 6. **Add the payroll deductions**. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. 6. \$732.12 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2.240.55 \$0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 \$0.00 Interest and dividends 8h \$0.00 \$0.00 Family support payments that you, a non-filing spouse, or a 8c. \$ 0.00 \$ 0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. **Unemployment compensation** b8 \$0.00 \$0.00 8e. **Social Security** 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive 8f. \$0.00 \$0.00 Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income 8g. 8g. \$0.00 \$0.00 Other monthly income. Specify: \_ 8h. \$0.00 \$0.00 9. **Add all other income**. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. \$0.00 \$0.00 Calculate monthly income. Add line 7 + line 9. 10 \$2,240.55 \$0.00 \$2.240.55 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. \$0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$2,240.55 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Do you expect an increase or decrease within the year after you file this form? X No. Yes. Explain:

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 30 of 55

| Fill in this ir     | formation to identify your of                                | 2001                       | DOGHHEIH                 | Page 30 01 5         | 5               |                     |                       |        |
|---------------------|--|----------------------------|--------------------------|----------------------|-----------------|---------------------|-----------------------|--------|
| FIII III UIIS II    | nformation to identify your ca                               | ise.                       |                          |                      |                 |                     |                       |        |
| Debtor 1            | Arnell   |                            | Bryant                   | Ch                   | eck if this is: |                     |                       |        |
|                     | First Name   | Middle Name                | Last Name                |                      | An amende       | ed filing           |                       |        |
| Debtor 2            |  |                            |                          |                      | A suppleme      | ent showing post    | t-petition chapter 13 |        |
| (Spouse, if filing) | First Name   | Middle Name                | Last Name                |                      | income as       | of the following of | date:                 |        |
| United States       | Bankruptcy Court for the : <u>NOF</u>                        | RTHERN DISTRICT OF IL      | LINOIS_                  |                      |                 |                     |                       |        |
| Case Numbe          | r  |                            |                          |                      | MM / DD / `     | YYYY                |                       |        |
| (If known)          |  |                            |                          |                      | A               | filler for Dobton   | 0 h D - h t 0         |        |
| Official E          | orm 106 l  |                            |                          |                      |                 | separate house      | 2 because Debtor 2    |        |
| <u>Official F</u>   | <u>form 106J</u>   |                            |                          | _                    | - mamams a      | i separate nouse    | anoid.                |        |
| Schedul             | le J: Your Expe  | nses                       |                          |                      |                 |                     |                       | 12/14  |
|                     | e and accurate as possible. If                               |                            | re filing together, both | are equally responsi | ble for supplyi | ng correct informa  | ation. If             |        |
| =                   | needed, attach another shee                                  |                            |                          | · · ·                |                 | =                   |                       |        |
| every question      |  |                            |                          |                      |                 |                     |                       |        |
| Part 1:             | Describe Your Household                                      |                            |                          |                      |                 |                     |                       |        |
|                     |  |                            |                          |                      |                 |                     |                       |        |
| 1. Is this a jo     |  |                            |                          |                      |                 |                     |                       |        |
|                     | Go to line 2.  |                            |                          |                      |                 |                     |                       |        |
| Yes.                | Does Debtor 2 live in a separ                                | ate household?             |                          |                      |                 |                     |                       |        |
|                     | No.  |                            |                          |                      |                 |                     |                       |        |
|                     | Yes. Debtor 2 must file                                      | a separate Schedule J.     |                          |                      |                 |                     |                       |        |
|                     |  |                            |                          |                      |                 |                     |                       |        |
| 2. Do you           | have dependents?   | No                         |                          | Dependent's rel      | •               | Dependent's         | Does dependent live   |        |
|                     | st Debtor 1 and  | X Yes. Fill out this       | information for          | Debtor 1 or Deb      | tor 2           | age<br>—            | with you?             |        |
| Debtor 2            | 2  | each dependen              | t                        | Daughter             |                 | 19                  | No                    |        |
| Do not s            | tate the dependents'   |                            |                          | 2 4 4 5 1 1 1        |                 |                     | Yes                   |        |
| names.              |  |                            |                          |                      |                 |                     | <b>X</b> No           |        |
|                     |  |                            |                          |                      |                 |                     | Yes                   |        |
|                     |  |                            |                          |                      |                 |                     | X No                  |        |
|                     |  |                            |                          |                      |                 |                     |                       |        |
|                     |  |                            |                          |                      |                 |                     | Yes                   |        |
|                     |  |                            |                          |                      |                 |                     | X No                  |        |
|                     |  |                            |                          |                      |                 |                     | Yes                   |        |
|                     |  |                            |                          |                      |                 |                     | X No                  |        |
|                     |  |                            |                          |                      |                 |                     | Yes                   |        |
|                     |  |                            |                          |                      |                 |                     | 1                     |        |
| -                   | expenses include<br>es of people other than                  | X No                       |                          |                      |                 |                     |                       |        |
|                     | f and your dependents?                                       | Yes                        |                          |                      |                 |                     |                       |        |
| Part 2:             |  |                            |                          |                      |                 |                     |                       |        |
|                     | Estimate Your Ongoing Monthly                                |                            |                          |                      | <u> </u>        |                     |                       |        |
| _                   | expenses as of your bankru<br>of a date after the bankruptcy |                            | -                        |                      |                 | =                   |                       |        |
| the applicable      |  | is ilieu. Il tilis is a su | premental ochedule o,    | check the box at the | top of the for  | ii and iii iii      |                       |        |
| Include expen       | ses paid for with non-cash g                                 | overnment assistance       | if you know the value    |                      |                 |                     |                       |        |
| of such assist      | ance and have included it on                                 | Schedule I: Your Inco      | ome (Official Form 106I  | .)                   |                 | •                   | our expenses          |        |
| 4. The ren          | tal or home ownership exper                                  | sees for vour residenc     | nclude first mortgage    | navments and         |                 |                     |                       |        |
|                     | for the ground or lot.                                       | ises for your residence    | c. morade mat mortgage   | payments and         |                 | 4.                  | \$7:                  | 50.00  |
|                     | cluded in line 4:  |                            |                          |                      |                 | ٦.                  | <b></b>               |        |
|                     |  |                            |                          |                      |                 |                     |                       |        |
| 4a. Re              | eal estate taxes   |                            |                          |                      |                 | 4a.                 |                       | \$0.00 |
| 4b. Pr              | operty, homeowner's, or rente                                | r's insurance              |                          |                      |                 | 4b.                 |                       | \$0.00 |
| 4c. Ho              | ome maintenance, repair, and                                 | upkeep expenses            |                          |                      |                 | 4c.                 | \$                    | 20.00  |
| 4d. Ho              | omeowner's association or cor                                | ndominium dues             |                          |                      |                 | 4d.                 | :                     | \$0.00 |
|                     |  |                            |                          |                      |                 | ,                   |                       |        |

 Official Form 106J
 Record # 711893
 Schedule J: Your Expenses
 Page 1 of 3

Document

Last Name

Arnell

First Name

Middle Name

Debtor 1

Page 31 of 55 Case Number (if known) \_

Your expenses \$0.00 5. 5. Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** Electricity, heat, natural gas 6a. \$240.00 6a. \$0.00 6b. Water, sewer, garbage collection 6c. \$60.00 Telephone, cell phone, internet, satellite, and cable service 6c. \$ 0.00 Other. Specify:\_ 6d. 7. \$550.00 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$135.00 9. 9. Clothing, laundry, and dry cleaning \$30.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 12. \$120.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. \$20.00 Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$87.00 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$140.00 15a. Life insurance 15a. \$0.00 15b 15b. Health insurance \$0.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify:\_ 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16. Specify: 17. Installment or lease payments: \$0.00 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. \$0.00 \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 18 from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. \$0.00 Specify:\_ 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 20a. Mortgages on other property 0.00 \$ 20h 20b. Real estate taxes \$ 0.00 20c. 20c. Property, homeowner's, or renter's insurance 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e. 20e. Homeowner's association or condominium dues

Official Form 106J Record # 711893

Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Case 16-30716 Doc 1

Document Page 32 of 55 Arnell Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name 21. \$5.00 21. Other. Specify: \_\_\_Postage/Bank Fees (\$5.00), \$2,232.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. \$2,240.55 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$2,232.00 23b. Copy your monthly expenses from line 22 above. 23b.-Subtract your monthly expenses from your monthly income. 23c. 23c. \$8.55 The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

| For | example,  | do you expect to finish paying for your car loan within the year or do you expect your |
|-----|-----------|--|
| mor | tgage pay | ment to increase or decrease because of a modification to the terms of your mortgage   |
| Х   | No        |  |
|     | Yes.      | Explain Here:  |
|     |           |  |
|     |           |  |

Official Form 106J Record # 711893 Schedule J: Your Expenses Page 3 of 3 Fill in this information to identify your case: Arnell Bryant Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the :  $\underline{\quad NORTHERN} \underline{\quad } District of \underline{\quad ILLINOIS}$ Case Number Check if this is an (If known) amended filing

# Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |  |   |
|--|--|---|
| Did you pay or agree to pay someone who is NOT a                 | n attorney to help you fill out bankrupt | cy forms?   |
| No   |  |   |
| Yes. Name of Person  |  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |  |   |
|  |  |   |
| Under penalty of perjury, I declare that I have read to correct. | he summary and schedules filed with t    | his declaration and that they are true and  |
| <b>★</b> /s/ Arnell Bryant                                       | <b>x</b>                                 |   |
| Signature of Debtor 1  | Signature of Debtor 2                    |   |
| Date 09/23/2016<br>MM / DD / YYYY                                | DateMM / DD / YY                         | YY  |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 34 of 55

| Fill in this in     | formation to ide   | ntify your case:                       |           |
|---------------------|--------------------|--|-----------|
| Debtor 1            | Arnell             |  | Bryant    |
|                     | First Name         | Middle Name                            | Last Name |
| Debtor 2            |                    |  |           |
| (Spouse, if filing) | First Name         | Middle Name                            | Last Name |
| United States       | Bankruptcy Court f | or the : <u>NORTHERN</u> District of _ |           |
| Case Number         | -                  |  | (State)   |
| (If known)          |                    |  | _         |
|                     |                    |  |           |

# Official Form 107

# Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

|  | Marital Status and Where   | e Tou Liveu Belore                                   |   |                               |
|--|----------------------------|--|---|-------------------------------|
| What is your current marital sta   | itus ?                     |  |   |                               |
| Married  |                            |  |   |                               |
| Not married  |                            |  |   |                               |
| During the last 3 years, have yo   | ou lived anywhere other    | than where you live no                               | w?  |                               |
| ☐ No.  |                            |  |   |                               |
| Yes. List all of the places you  | lived in the last 3 years. | Do not include where y                               | ou live now.  |                               |
| Debtor 1   |                            | Dates Debtor 1<br>lived there                        | Debtor 2:   | Dates Debtor 2<br>lived there |
|  |                            |  | Same as Debtor 1  | Same as Debtor                |
| 3510 W Polk St   |                            | FROM 11/2012   |   |                               |
|  |                            | T 04/0044  |   |                               |
| Chicago IL 60624-4113  |                            | To 04/2014   |   |                               |
| Chicago IL 60624-4113  |                            | 10 04/2014   |   |                               |
| Within the last 8 years, did you property states and territories is and Wisconsin.)                                      | -                          | or legal equivalent in a                             | community property state or territory?<br>evada, New Mexico, Puerto Rico, Texas |                               |
| Within the last 8 years, did you property states and territories in  | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   |                               |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   |                               |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   | · ·                           |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   | · ·                           |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   | · ·                           |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   | · ·                           |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   | · ·                           |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   | · ·                           |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   | · ·                           |
| Within the last 8 years, did you property states and territories is and Wisconsin.)  No.  Yes. Make sure you fill out So | nclude Arizona, Califorr   | or legal equivalent in a<br>nia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas   |                               |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 35 of 55

Bryant Arnell Debtor 1 Case Number (if known) Middle Name Last Name First Name Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income Gross income Sources of income Gross income Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$22,817 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$35,968 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$30,157 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income Sources of income Gross income Gross income Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 36 of 55

| Debtor 1 | Arnell                        |   | Bryant                 | _                                       | Case Number (if known)  |   |
|----------|-------------------------------|---|------------------------|---|-------------------------|---|
|          | First Name                    | Middle Name   | Last Name              |   |                         |   |
| 06 Aı    | re either Deb                 | tor 1's or Debtor 2's debts primarily co  | nsumer debts?          |   |                         |   |
| Г        | No. <b>Neithe</b>             | r Debtor 1 nor Debtor 2 has primarily c   | onsumer debts. Cor     | nsumer debts are defined                | in 11 U.S.C. § 101(8) a | as  |
| -        | _                             | ed by an individual primarily for a persor  |                        |   |                         | -   |
|          |                               | the 90 days before you filed for bankrup  | -                      | • •                                     | * or more?              |   |
|          | □ No                          | o. Go to line 7.  |                        |   |                         |   |
|          | Ye                            | es. List below each creditor to whom you  | paid a total of \$6,22 | 25* or more in one or more              | e payments and the      |   |
|          | to                            | tal amount you paid that creditor. Do not   | include payments fo    | or domestic support obliga              | itions, such as         |   |
|          |                               | o adjustment on 4/01/16 and every 3 yea   |                        | •                                       | -                       |   |
|          | _                             |   |                        |   | •                       |   |
|          | _                             | or 1 or Debtor 2 or both have primarily  g the 90 days before you filed for bankru    |                        | ny creditor a total of \$600            | or more?                |   |
|          | _                             | o. Go to line 7.  | iptoy, aid you pay air | iy orealtor a total or wood             | or more:                |   |
|          |                               |   |                        |   |                         |   |
|          | _                             | es. List below each creditor to whom you  | •                      |   |                         |   |
|          |                               | editor. Do not include payments for dom   |                        | • | t and                   |   |
|          | alı                           | imony. Also, do not include payments to   | an attorney for this b | pankruptcy case.                        |                         |   |
|          |                               |   | Dates of               | Total amount paid                       | Amount you still        | owe Was this payment for                        |
|          |                               |   | payments               | ,                                       | ,                       |   |
|          |                               |   |                        |   |                         | <b>=</b>  |
|          |                               | Select Portfolio Svcin Po Box   | Monthly                | \$ 1,875                                | \$ 67,673               | Mortgage  |
|          |                               | 65250 Salt Lake City UT 84165   |                        |   |                         | ☐ Credit card                                   |
|          |                               |   |                        |   |                         | Loan repayment                                  |
|          |                               |   |                        |   |                         | Suppliers or vendors                            |
|          |                               |   |                        |   |                         | Other   |
|          |                               |   |                        |   |                         |   |
|          |                               |   |                        |   |                         |   |
| 07 W     | -<br>ithin 1 vear b           | efore you filed for bankruptcy, did you m   | ake a payment on a     | debt you owed anyone w                  | ho was an insider?      |   |
| In       | siders include                | e your relatives; any general partners; rel   | latives of any genera  | l partners; partnerships o              | f which you are a gener |   |
|          |                               | which you are an officer, director, person<br>gone for a business you operate as a so | ,                      |   | ,                       | , , ,   |
| _        | -                             | upport and alimony.   |                        |   |                         |   |
|          | No.                           |   |                        |   |                         |   |
| [        | Yes. List all                 | payments to an insider.   |                        |   |                         |   |
|          |                               |   | Dates of payment       |   | Amount you still owe    | Reason for this payment                         |
|          |                               |   |                        |   |                         |   |
|          | 'ithin 1 year b<br>n insider? | efore you filed for bankruptcy, did you m   | ake any payments or    | r transfer any property on              | account of a debt that  | penefited                                       |
|          |                               | nts on debts guaranteed or cosigned by  | an insider.            |   |                         |   |
|          | No.                           |   |                        |   |                         |   |
| [        | Yes. List all                 | payments to an insider.   |                        |   |                         |   |
|          |                               |   | Dates of payment       |   | Amount you still owe    | Reason for this payment Include creditor's name |
| Part     | 4. Identif                    | y Legal actions, Repossessions, and Fore  | closures               |   |                         |   |
|          |                               |   |                        |   |                         |   |
|          |                               |   |                        |   |                         |   |
|          |                               |   |                        |   |                         |   |
|          |                               |   |                        |   |                         |   |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 37 of 55

| )ebto | or 1        | Arnell   | Bryant                              | Case Number (if kno              | own)                  |   |
|-------|-------------|--|-------------------------------------|----------------------------------|-----------------------|---|
|       |             | First Name Middle Name   | Last Name                           |                                  |                       |   |
| 09    | List<br>mod | nin 1 year before you filed for bankruptcy, were you all such matters, including personal injury cases, s difications, and contract disputes.  No.       |                                     |                                  |                       |   |
|       | $\square$   | Yes. Fill in the details.  |                                     |                                  |                       |   |
|       |             |  | Nature of the case                  | Court or agency                  |                       | Status of the case                          |
| 10    |             | nin 1 year before you filed for bankruptcy, was any eck all that apply and fill in the details below.  |                                     | = -                              | eized, or levied?     |   |
|       |             | No. Go to line 11<br>Yes. Fill in the information below.   |                                     |                                  |                       |   |
| 11    |             | nin 90 days before you filed for bankruptcy, did a<br>efuse to make a payment because you owed a de  | _                                   | inancial institution, set off an | y amounts from y      | our accounts                                |
|       |             | No. Go to line 11  |                                     |                                  |                       |   |
|       | _           | Yes. Fill in the information below.  |                                     |                                  |                       |   |
| 12    | With        | nin 1 year before you filed for bankruptcy, was an<br>rt-appointed receiver, a custodian, or another off   |                                     | sion of an assignee for the be   | nefit of creditors,   | a   |
|       | =           |  |                                     |                                  |                       |   |
|       | ☐ Y         | res.   |                                     |                                  |                       |   |
|       | art 5:      | List Certain Gifts and Contributions   |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
| 13    | _           | hin 2 years before you filed for bankruptcy, did yo<br>No.   | ou give any gifts with a total valu | e of more than \$600 per perso   | on?                   |   |
|       | _           | Yes. Fill in the details for each gift.  |                                     |                                  |                       |   |
| 14    | With        | nin 2 years before you filed for bankruptcy, did y   | ou give any gifts or contributions  | with a total value of more that  | an \$600 to any ch    | arity?                                      |
|       | П           | No   |                                     |                                  |                       |   |
|       |             | Yes. Fill in the details for each gift.  |                                     |                                  |                       |   |
|       |             | Gifts or contributions to charities that total more than \$600   | Describe what you contributed       |                                  | Date you contributed  | Value                                       |
|       |             | Good Hope Free Will Baptist Church,  | Money                               |                                  | Weekly                | Debtor contributes                          |
|       |             | 705 S California, Chicago, IL 60624  |                                     |                                  |                       | \$20 weekly,                                |
|       |             |  |                                     |                                  |                       | Approximately \$2,000 over the last 2 years |
|       |             |  |                                     |                                  |                       | over the last 2 years                       |
|       |             |  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
| P     | art 6:      | List Certain Losses  |                                     |                                  |                       |   |
| 15    |             | nin 1 year before you filed for bankruptcy or sinc<br>nbling?  | e you filed for bankruptcy, did yo  | ou lose anything because of the  | neft, fire, other dis | easter, or                                  |
|       |             | No.  |                                     |                                  |                       |   |
|       |             | Yes. Fill in the details for each gift.  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
|       | -47         | List Certain Payments or Transfers   |                                     |                                  |                       |   |
| Ш     | art 7:      |  |                                     |                                  |                       |   |
| 16    | con         | nin 1 year before you filed for bankruptcy, did yo<br>sulted about seeking bankruptcy or preparing a<br>ude any attorneys, bankruptcy petition preparers | bankruptcy petition?                |                                  |                       | ou  |
|       |             | No.  |                                     |                                  |                       |   |
|       | =           | Yes. Fill in the details   |                                     |                                  |                       |   |
|       |             | 1 63. T III III UIC UCIdiis  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |
|       |             |  |                                     |                                  |                       |   |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 38 of 55 Arnell **Bryant** Debtor 1 Case Number (if known) Middle Name Last Name Party Contact Info Description and value of any property transferred Amount of payment Date payment or transfer Geraci Law L.L.C. \$1,200.00 55 E. Monroe Street #3400 Chicago,IL 60603 **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services Hananwill Credit Counseling 2016 \$25.00 115 N. Cross St. Robinson, IL 62454 17 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No. Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No.

Yes. Fill in the details.

Describe the contents

Who else had access to it?

Do you still have it?

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 39 of 55

| Debt | or 1   | Arnell                       |   | Bryant   | Case Number (if known)                       |                       |
|------|--------|------------------------------|---|--|--|-----------------------|
|      |        | First Name                   | Middle Name   | Last Name  |  |                       |
| 22   | Hav    | ve you stored pro            | operty in a storage unit o                                      | r place other than your home within 1 y  | ear before you filed for bankruptcy?         |                       |
|      | _      |                              |   |  |  |                       |
|      | =      | No.                          |   |  |  |                       |
|      | Ш      | Yes. Fill in the de          | etails.   |  |  |                       |
|      |        |                              |   | Who else has or had access to it?  | Describe the contents                        | Do you still have it? |
|      |        | Identife Due                 |   |  |  |                       |
|      | art 9  | identity Pro                 | perty You Hold or Control f                                     | or someone Eise  |  |                       |
| 23   |        | you hold or cont<br>someone. | trol any property that son                                      | neone else owns? Include any property  | you borrowed from, are storing for, or ho    | ld in trust           |
|      |        | No.                          |   |  |  |                       |
|      | П      | Yes. Fill in the de          | etails.   |  |  |                       |
|      | _      |                              |   | Where is the property?   | Describe the property                        | Value                 |
|      |        |                              |   |  |  |                       |
| P    | art 10 | Give Details                 | About Environmental Info  | rmation  |  |                       |
| Fo   | r the  | purpose of Part              | 10, the following definition                                    | ons apply:   |  |                       |
|      | Fnvi   | ronmental law m              | noans any fodoral stato   | or local statute or regulation concernin   | n pollution, contamination, releases of      |                       |
| _    | haza   | ardous or toxic s            | substances, wastes, or ma                                       | aterial into the air, land, soil, surface wa<br>the cleanup of these substances, waste | ater, groundwater, or other medium,          |                       |
|      |        | -                            | tion, facility, or property a<br>perate, or utilize it, includi |  | v, whether you now own, operate, or utiliz   | e                     |
|      | Uama   |                              |   |  | anta harranda ya ayibatawa tayib             |                       |
|      |        |                              |   | onmental law defines as a hazardous w<br>ntaminant, or similar term.                   | aste, nazardous substance, toxic             |                       |
| Re   | port a | all notices, relea           | ses, and proceedings tha  | at you know about, regardless of when  | they occurred.                               |                       |
| 24   | Has    | any governmen                | ntal unit notified you that                                     | you may be liable or potentially liable ι  | ınder or in violation of an environmental la | aw?                   |
|      |        | No.                          |   |  |  |                       |
|      | =      | Yes. Fill in the de          | etails  |  |  |                       |
|      | ш      |                              |   | Governmental unit  | Environmental law, if you know it            | Date of notice        |
|      |        |                              |   |  |  |                       |
| 25   | Hav    | e you notified a             | ny governmental unit of a                                       | any release of hazardous material?   |  |                       |
|      |        | No.                          |   |  |  |                       |
|      | П      | Yes. Fill in the de          | etails.   |  |  |                       |
|      | _      |                              |   | Governmental unit  | Environmental law, if you know it            | Date of notice        |
|      |        |                              |   |  |  |                       |
| 26   | Hav    | e you been a pa              | rty in any judicial or adm                                      | inistrative proceeding under any enviro  | onmental law? Include settlements and or     | ders.                 |
|      |        | No.                          |   |  |  |                       |
|      | П      | Yes. Fill in the de          | etails.   |  |  |                       |
|      | _      |                              |   | Court or agency  | Nature of the case                           | Status of the case    |
|      |        |                              |   |  |  |                       |
| P    | art 11 | Give Details                 | About Your Business or C  | onnections to Any Business   |  |                       |
| 27   | \A/;+I | hin 4 voore hefe             | ro you filed for bankrunts                                      | ny did you awa a business or baye any  | of the following connections to any busin    | 20003                 |
|      | VVIL   | _                            |   |  | of the following connections to any busin    | Je55 f                |
|      |        |                              |   | a trade, profession, or other activity, ei   | ·  |                       |
|      |        | ∐ A member of                | f a limited liability compa                                     | ny (LLC) or limited liability partnership  | (LLP)  |                       |
|      |        | A partner in                 | a partnership   |  |  |                       |
|      |        | An officer, di               | irector, or managing exec                                       | cutive of a corporation  |  |                       |
|      |        | An owner of                  | at least 5% of the voting                                       | or equity securities of a corporation  |  |                       |
|      |        | No. None of the              | above applies. Go to Part                                       | : 12   |  |                       |
|      | =      |                              | • •   |  |  |                       |
|      | Ц      | res. Check all th            | iai appiy above and iiii in t                                   | he details below for each business.  |  |                       |
|      |        |                              |   |  |  |                       |
|      |        |                              |   |  |  |                       |
|      |        |                              |   |  |  |                       |
|      |        |                              |   |  |  |                       |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 40 of 55

|               | Arnell  |                             |                                     | age 40 of 00   |                        |
|---------------|---|-----------------------------|-------------------------------------|--|------------------------|
| Debtor 1      |   |                             | Bryant                              | Case Number (if known)   |                        |
|               | First Name  | Middle Name                 | Last Name                           |  |                        |
|               | thin 2 years before you<br>titutions, creditors, or |                             | you give a financial statemen       | t to anyone about your business? Include all financial                                       |                        |
|               | No.   |                             |                                     |  |                        |
|               | Yes. Fill in the details.                           |                             |                                     |  |                        |
|               |   | Date iss                    | sued                                |  |                        |
| Part 12       | Sign Below  |                             |                                     |  |                        |
| in co<br>18 U | onnection with a bankr<br>.S.C. §§ 152, 1341, 151   | uptcy case can result in fi | nes up to \$250,000, or impris      | ing property, or obtaining money or property by fraud onment for up to 20 years, or both.    |                        |
| X             | /s/ Arnell Bryant                                   |                             | ×                                   |  |                        |
|               | Signature of Debtor 1                               |                             | Signature of                        | of Debtor 2  |                        |
|               | Date 09/23/2016                                     |                             | Data                                |  |                        |
|               | MM / DD / YY  | <del>YY</del>               |                                     | / DD / YYYY  |                        |
| <b>■</b> !    | No<br>Yes<br>you pay or agree to pa                 |                             | of Financial Affairs for Individual | uals Filing for Bankruptcy (Official Form 107)?  |                        |
| □ <b>'</b>    | Yes. Name of person _                               |                             |                                     | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Forr | m 110)                 |
|               |   |                             |                                     | Deciaration, and Signature (Official Forf  | II I I <del>3</del> ). |

| Fill in this i              | nformation to identify                                   |                                 |  | ed 09/27/16 14:35:3<br>1 of 55   | 2 Desc Main   |      |
|-----------------------------|--|---------------------------------|--|----------------------------------|---|------|
|                             |  |                                 |  | 1 01 33                          |   |      |
| Debtor 1                    | Arnell   |                                 | Bryant                                   |                                  |   |      |
|                             | First Name   | Middle Name                     | Last Name                                |                                  |   |      |
| Debtor 2                    | First Name   | Middle Name                     | LastNama                                 |                                  |   |      |
| (Spouse, if filing)         | First Name   | Middle Name                     | Last Name                                |                                  |   |      |
|                             | s Bankruptcy Court for th<br>District of <u>ILLINOIS</u> | e : <u>NORTHERN DISTRICT OF</u> | ILLINOIS EASTERN                         |                                  | _   |      |
| DIVISION                    | District of <u>ILLINOIS</u>                              |                                 | (State)                                  |                                  | Check if this is an                                 |      |
|                             |  |                                 |  |                                  | amended filing                                      |      |
| Official E                  | Form 100   |                                 |  |                                  |   |      |
| Official F                  | orm 108  |                                 |  |                                  |   |      |
| Stateme                     | ent of Intenti   | ion for Individua               | Is Filing Under Chap                     | ter 7                            |   | 12/1 |
| f you are an ir             | ndividual filing under                                   | chapter 7, you must fill out    | this form if:                            |                                  |   |      |
| creditors ha                | ve claims secured by                                     | your property, or               |  |                                  |   |      |
| you have lea                | ased personal proper                                     | ty and the lease has not exp    | ired.                                    |                                  |   |      |
| You must file t             | this form with the cou                                   | ırt within 30 days after you f  | ile your bankruptcy petition or by th    | e date set for the meeting of cr | editors,  |      |
| whichever is e              | earlier, unless the cou                                  | irt extends the time for caus   | e. You must also send copies to the      | creditors and lessors you list.  |   |      |
| f two married               | people are filing toge                                   | ether in a joint case, both are | e equally responsible for supplying      | correct information.             |   |      |
| Both debtors r              | must sign and date th                                    | e form.                         |  |                                  |   |      |
| Be as complet               | e and accurate as po                                     | ssible. If more space is need   | ded, attach a separate sheet to this f   | orm. On the top of any addition  | al pages,   |      |
| write your nam              | ne and case number (                                     | (if known).                     |  |                                  |   |      |
| Part 1:                     | List Your Creditors W                                    | ho Have Secured Claims          |  |                                  |   |      |
| For any cre     information | <del>-</del>   | I in Part 1 of Schedule D: Cr   | editors Who Have Claims Secured b        | oy Property (Official Form 106D  | ), fill in the                                      |      |
| Identify the                | e creditor and the pro                                   | perty that is collateral        | What do you intend to do secures a debt? | with the property that           | Did you claim the property as exempt on Schedule C? |      |
| Creditor's                  | 5  |                                 | ☐ Surrender the p                        | property                         | ∏No   |      |
| name:                       |  |                                 | =  | erty and redeem it               | _   |      |
|                             | _  |                                 |  | erty and enter into a            | ∐ Yes   |      |
| Description                 | on of  |                                 | Reaffirmation A                          | •                                |   |      |
| property                    | -1-1-1-  |                                 | <u>—</u>                                 | -                                |   |      |
| securing                    | dept:  |                                 | ☐ Retain the prop                        | erty and [explain]:              | _   |      |
| <b>.</b>                    |  |                                 |  |                                  |   |      |
| Creditor's                  | 8  |                                 | Surrender the p                          | • •                              | ☐ No  |      |
| name:                       |  |                                 |  | erty and redeem it               | ☐ Yes   |      |
| Description                 | on of  |                                 | ☐ Retain the prop                        | erty and enter into a            |   |      |
| property                    | <b></b> .  |                                 | Reaffirmation A                          | Agreement.                       |   |      |
| securing                    | debt:  |                                 |  | erty and [explain]:              |   |      |
| . 9                         |  |                                 |  | , , , , <u> </u>                 | <del>_</del><br>                                    |      |
| Creditor's                  |  |                                 | ☐ Surrender the p                        | property                         | <br>No  |      |
| C. Saitor t                 | -  |                                 |  |                                  | <b>□''</b>  |      |

Arnell

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 42 of Page 42

First Name

|  |  |  | _ | _ |  |
|--|--|--|---|---|--|
|  |  |  |   |   |  |

**List Your Unexpired Personal Property Leases** 

| For any unexpired personal property lease that you listed in Schedul            | e G: Executory Contracts and Unexpired Leases (Official Form 10 | 16G).                      |
|---|---|----------------------------|
| fill in the information below. Do not list real estate leases. <i>Unexpired</i> |   |                            |
| ended. You may assume an unexpired personal property lease if the               |   |                            |
| · · · · · · · · · · · · · · · · · · ·   |   |                            |
| Describe your unexpired personal property leases                                |   | Will the lease be assumed? |
| Lessor's name:  |   | □ No                       |
|   |   | Yes                        |
| Description of leased   |   | <b>—</b> 100               |
| property:   |   |                            |
|   |   |                            |
| Lessor's name:  |   | ☐ No                       |
|   |   | Yes                        |
| Description of leased   |   |                            |
| property:   |   |                            |
|   |   |                            |
| Lessor's name:  |   | □No                        |
| Description of least  |   | Yes                        |
| Description of leased property:   |   |                            |
| property.   |   |                            |
| Lessor's name:  |   | □No                        |
|   |   | □Yes                       |
| Description of leased   |   | ∟Yes                       |
| property:   |   |                            |
|   |   |                            |
| Lessor's name:  |   | □No                        |
|   |   | <br>□Yes                   |
| Description of leased   |   | Птез                       |
| property:   |   |                            |
|   |   |                            |
| Lessor's name:  |   | □No                        |
|   |   | □Yes                       |
| Description of leased   |   |                            |
| property:   |   |                            |
|   |   |                            |
| Lessor's name:  |   | □ No                       |
|   |   | Yes                        |
| Description of leased property:   |   |                            |
| property.   |   |                            |
|   |   |                            |
| Part 3: Sign Below  |   |                            |
| Jnder penalty of perjury, I declare that I have indicated my intention a        | bout any property of my estate that secures a debt and any      |                            |
| personal property that is subject to an unexpired lease.                        | , property of my sound man section a door and any               |                            |
|   |   |                            |
| le /e/ Arnell Privant   |   |                            |
| ★ /s/ Arnell Bryant Signature of Debtor 1                                       | Signature of Debtor 2   |                            |
|   |   |                            |
| Date Dated: 09/23/2016 [MM / DD / YYYY  | Date  |                            |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Page 43 of 55 Document

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In  | ·e                              |                            |  |                                 |  |   |                        |
|-----|---------------------------------|----------------------------|--|---------------------------------|--|---|------------------------|
| Arı | Arnell Bryant / Debtor Case No: |                            |  |                                 |  |   |                        |
|     |                                 |                            |  |                                 | Chapter:                                     | Chapter 7                                 |                        |
|     |                                 |                            | DISCLOSURE OF C  | OMPENSATION OF ATT              | ORNEY FOR DEI                                | BTOR                                      |                        |
|     | npensation p                    | paid to me v               | . § 329(a) and Fed. Bankr. P. 201 within one year before the filing of l on behalf of the debtor(s) in con   | 6(b), I certify that I am the a | attorney for the above, or agreed to be paid | ve named debtor(s<br>d to me, for service | ces                    |
|     | For legal                       | services, I                | have agreed to accept  | \$2,195.00                      |  |   |                        |
|     | Prior to th                     | he filing of               | this statement I have received   | \$1,200.00                      |  |   |                        |
|     | Balance I                       | Due                        |  | \$995.00                        |  |   |                        |
| 2.  | The source                      | e of the cor               | mpensation paid to me was:   |                                 |  |   |                        |
|     | Deb                             | otor(s)                    | Other: (specify  |                                 |  |   |                        |
| 3.  | The source                      | e of compe                 | nsation to be paid to me is:   |                                 |  |   |                        |
|     | De                              | ebtor(s)                   | Other: (specify  |                                 |  |   |                        |
| 4.  |                                 | e not agree<br>y law firm. | d to share the above-disclosed co  | mpensation with any other p     | person unless they ar                        | re members and a                          | ssociates              |
|     |                                 | y law firm.                | share the above-disclosed compo<br>A copy of the agreement, togeth   | -                               | -  |   |                        |
| 5.  | In return for case, inclu       |                            | e-disclosed fee, I have agreed to  | render legal service for all a  | spects of the bankru                         | ptcy                                      |                        |
|     | a. Analy                        | ysis of the o              | debtor's financial situation, and r  | endering advice to the debto    | or in determining wh                         | ether to file a pet                       | ition in               |
|     | bankı                           | ruptcy;                    |  |                                 |  |   |                        |
|     | b. Prepa                        | aration and                | filing of any petition, schedules,   | statements of affairs and pla   | n which may be req                           | uired;                                    |                        |
|     | c. Repre                        | esentation of              | of the debtor at the meeting of cre  | editors and confirmation hea    | ring, and any adjour                         | ned hearings ther                         | eof;                   |
|     | d. Repre                        | esentation of              | of the debtor in adversary proceed   | lings and other contested ba    | nkruptcy matters;                            |   |                        |
|     | e. [Othe                        | er provision               | as as needed]  |                                 |  |   |                        |
| 6.  | By agreen                       | nent with th               | ne debtor(s), the above-disclosed  | fee does not include the follo  | owing service:                               |   |                        |
| cha |                                 |                            | lude missed meeting or court<br>lances, dischargeability actions, o  |                                 |  | •   | conversions to another |
|     |                                 | payment<br>me for re       | tify that the foregoing is a completo epresentation of the debtor(s) in th |                                 | Ü  | or  |                        |
|     |                                 | Date.                      |  | Signature of Attorney           |  |   |                        |
|     |                                 |                            |  | Geraci Law L.L.C.               |  |   |                        |

711893 Page 1 of 1 Record #

Name of law firm

ed 09/27/16 14:35:32 Desc Main 4 of 55 ase 16-30716 Doc 1 File # 66767 Haw E National Headquarters: 55 E. Monroe Street #3400 Chicago Case 16-30716

Date: 6/9/2016

Consultation Attorney: MEZ

Record #: 711-893



#### **Chapter 7 Retainer Agreement**

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter7 bankruptcy under the following terms and conditions:

Attorney fees for the Chapter 7 bankruptcy are \$\_ . This amount does NOT INCLUDE court filing fees of \$335, or costs for credit counseling or financial management classes. This fee is based on the anticipated amount of work required to complete my case, and upon the information I have provided to date. If any information is incomplete or incorrect, the advice or Chapter may have to change, and this fee may have to be adjusted. This fee includes all work in the representation of my normal Chapter7, including preparation of my bankruptcy petition, schedules and other documents, first341 meeting, reaffirmations, normal correspondence with my creditors and myself, but does NOT include excessive work caused by you, missed341 meetings, reopening the case, amendments to schedules, work on audits or asset cases, objections to exemptions, conversion to another chapter, evidentiary hearings, other contested matters or motions, or adversary proceedings, because these cannot be predicted in setting a flat fee. For work done on these matters, we bill between \$275/hr and \$450/hr for attorney time, based on the attorney doing the work, and \$85 to \$125/hr paralegal time. I agree that more than one attorney and paralegal will work on my case.

Fees are "flat fees" and "advance payment retainers" for pre-filing work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". You may elect to be billed on an hourly basis, but we have found a flat fee is cheaper and benefits you. If this contract is terminated by either party prior to the filing of the case, the firm will refund unearned fees based on the above rates with an accounting, and on request, submit any dispute to binding arbitration within30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

I understand that bankruptcy laws only allow me to protect a certain amount of my property, and if I have any unprotected property, I understand my Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest and that the U.S. Trustee may object to my filing a Chapter 7 if they believe I have excess income and should be filing a Chapter 13.

I agree to fully cooperate with my attorneys and provide all information requested at any point during the case. I understand that if I do not fully cooperate or provide complete and accurate information, my attorneys may withdraw from representation of me, with the permission of the Court.

If I have secured debts that I wish to retain (mortgages, financed vehicles or other financed property) that I may be required to sign a reaffirmation agreement with the creditor in order to keep the property, and I must remain current on my payments. Many mortgage and car companies refuse to reaffirm the debt but we have found that if you keep up your payments you keep the property anyway.

Debts not discharged if they not paid in full: student loans; educational debts & tuition; most tax debts: unfiled, trust fund or late filed tax; undisclosed debts; support/maintenance debts; fines, debts incurred by fraud, or after the case is filed, future condo/HOA dues,or debts listed in your red or green folder as usually not discharged, or found non-dischargeable by a Judge.

Representation limited to Bankruptcy Court We don't represent you in state court, or loan modifications or similar matters.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition.

I understand that if I fail to take my financial management class after filing but before discharge, my case may be closed without a discharge, and I will be required to pay fees and costs to have it reopened. I have received the 11U.S.C § 527(a) disclosures.

(Joint Debtor) Attorney for the Debter(s), Representing Geraci Law L.L.C. rev 150511

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 45 of 55

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Arnell Bryant / Debtor | Bankruptcy Docket #: |
|------------------------|----------------------|
|                        | Judge:               |

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 09/23/2016 /s/ Arnell Bryant

**Arnell Bryant** 

X Date & Sign

Record # 711893 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Page 46 of 55

Desc Main

B 201A (Form 201A) (11/11)

#### UNITED STATES BANKRUPTCY COURT

#### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 711893 Page 1 of 2 Record #

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main

Form B 201A, Notice to Consumer Debtor(s)

In re Arnell

Page 47 of 55

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 09/23/2016 | /s/ Arnell Bryant                  |  |
|-------------------|------------------------------------|--|
|                   | Arnell Bryant                      |  |
| Dated: 09/27/2016 | /s/ Christopher Michael Dyer       |  |
|                   | Attorney: Christopher Michael Dyer |  |

Form B 201A. Notice to Consumer Debtor(s) Record # 711893 Page 2 of 2

### Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 48 of 55

| Debtor 1   | Arnell   | Bryant  | Case Number (if i  | known)  |  |  |  |
|--|--|---|--|---|--|--|--|
| JODIO: 1   | First Name   | Middle Name Last Name   |  |   |  |  |  |
| Part 6   | Answer These Question                                  | ons for Reporting Purposes  |  |   |  |  |  |
| 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8)  as "incurred by an individual primarily for a personal, family, or household purpose."   |  |   |  | ined in 11 U.S.C. § 101(8)<br>purpose."                             |  |  |  |
|  |  | No. Go to line 16b. Yes. Go to line 17.   |  |   |  |  |  |
|  |  | 16b. Are your debts primarily in money for a business or investigation.                         | business debts? Business debts are debts trainent or through the operation of the busines                    | that you incurred to obtain<br>ss or investment.                    |  |  |  |
|  |  | No. Go to line 16c. Yes. Go to line 17.   |  |   |  |  |  |
|  |  | 16c. State the type of debts you ov   | ve that are not consumer debts or business d   | ebts.   |  |  |  |
|  |  |   |  |   |  |  |  |
|  | re you filing under<br>Chapter 7?                      | No. I am not filing under Cha   |  |   |  |  |  |
| 3  | Oo you estimate that afte                              |   | er 7. Do you estimate that after any exempt p<br>s are paid that funds will be available to distrit          | roperty is excluded and<br>oute to unsecured creditors?             |  |  |  |
| е  | ny exempt property is excluded and                     | No.   |  |   |  |  |  |
|  | idministrative expenses<br>are paid that funds will be | Yes.  |  |   |  |  |  |
|  | available for distribution to unsecured creditors?     |   |  |   |  |  |  |
| <b>E</b>   | low many creditors do                                  | 1-49  | 1,000-5,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000                                 |  |  |  |
| •  | ou estimate that you                                   | ☐ 50-99<br>☐ 100-199  | ☐ 5,001-10,000<br>☐ 10,001-25,000  | ☐ More than 100,000   |  |  |  |
|  |  | 200-999   |  |   |  |  |  |
| 19. <b>i</b>   | How much do you  | \$0-\$50,000  | \$1,000,001-\$10 million   | \$500,000,001-\$1 billion   |  |  |  |
|  | estimate your assets to                                | \$50,001-\$100,000  | \$10,000,001-\$50 million  | \$1,000,000,001-\$10 billion  |  |  |  |
|  | be worth?  | \$100,001-\$500,000   | \$50,000,001-\$100 million \$100,000,001-\$500 million   | ☐\$10,000,000,001-\$50 billion<br>☐More than \$50 billion           |  |  |  |
|  |  | \$500,001-\$1 million   |  | □\$500,000,001-\$1 billion  |  |  |  |
| 3  | How much do you  | <b>50-\$50,000</b>  | \$1,000,001-\$10 million   | \$1,000,000,001-\$10 billion  |  |  |  |
| 1  | estimate your liabilities                              | \$50,001-\$100,000  | \$10,000,001-\$50 million<br>\$50,000,001-\$100 million  | \$10,000,000,001-\$50 billion                                       |  |  |  |
| 1  | to be?   | \$100,001-\$500,000<br>\$500,001-\$1 million  | \$100,000,001-\$500 million  | ☐ More than \$50 billion  |  |  |  |
| Part   | 7: Sign Below  | □ \$500,001-\$1 Hillion   |  | <del>-</del>  |  |  |  |
|  |  | I have examined this petition, and  | I declare under penalty of perjury that the info   | ormation provided is true and                                       |  |  |  |
| For y  | ou   | correct.  |  |   |  |  |  |
| ***************************************  |  | If I have chosen to file under Chap<br>of title 11, United States Code. I u<br>under Chapter 7. | oter 7, I am aware that I may proceed, if eligib<br>nderstand the relief available under each cha            | ole, under Chapter 7, 11,12, or 13<br>pter, and I choose to proceed |  |  |  |
| If no attorney represents this document, I have obt  |  |   | did not pay or agree to pay someone who is dread the notice required by 11 U.S.C. § 343                      | not an attorney to help me fill out<br>2(b).                        |  |  |  |
|  |  |   | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. |   |  |  |  |
| I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  |  |   |  | ey or property by fraud in connection up to 20 years, or both.      |  |  |  |
| ANY AVERAGE DESCRIPTION OF THE PROPERTY OF THE |  | Signature of Debtor 1   | Bryant * sign  | nature of Debtor 2  |  |  |  |
| ***************************************  |  | 9.0   | 3/2016 ===   | cuted on  |  |  |  |
|  |  | Executed on : MM / DD   | / YYYY   | MM / DD / YYYY  |  |  |  |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 49 of 55

|   |                                     |  |  | -   |  |
|---|-------------------------------------|--|--|---|--|
| Fill in this in                                       | formation to identify               | your case:   |  |   |  |
| D-114   | Arnell                              |  | Bryant   |   |  |
| Debtor 1  | First Name                          | Middle Name  | Last Name  |   |  |
| Debtor 2  |                                     |  | Last Name  |   |  |
| (Spouse, if filing)                                   | First Name                          | Middle Name  |  |   |  |
| United States   | Bankruptcy Court for the            | : <u>NORTHERN</u> District of  | (State)  |   | _  |
| Case Numbe<br>(If known)                              | r                                   |  |  |   | Check if this is an amended filing         |
|   |                                     |  | <del> </del>   |   | amended ming                               |
| If two married  <br>You must file to<br>obtaining mon | people are filing toge              | ther, both are equally res<br>ou file bankruptcy schedu<br>ud in connection with a b | Debtor's Schedusponsible for supplying correctules or amended schedules. Mankruptcy case can result in f | · · · · · · · · · · · · · · · · · · ·                               | ng property, or nent for up to 20          |
|   | Sign Below<br>y or agree to pay son | neone who is NOT an atto   | orney to help you fill out bankr   | ruptcy forms?   |  |
| No No   |                                     |  |  |   |  |
| Yes.  | Name of Person                      |  |  | Attach <i>Bankruptcy Petition</i> I<br>Signature (Official Form 119 | Preparer's Notice, Declaration, and<br>3). |
|   |                                     |  |  |   |  |
| Under pen   | alty of perjury, I deck             | are that I have read the su  | ummary and schedules filed w   | vith this declaration and that they                                 | are true and                               |
| Signati   | ine of Debtor 1                     | Bryant   | Signature of Debto   | or 2  |  |

Date \_\_\_\_\_\_MM / DD / YYYY

### Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 50 of 55

| Debtor 1 | Arnell     |             | Bryant    | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

| Part 12: Sign Below  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |  |  |  |  |  |  |  |
| * Agull Bryant *   | Signature of Debtor 2  |  |  |  |  |  |  |  |
| Date 9 123/2016<br>MM / DD / YYYY  | DateMM / DD / YYYY   |  |  |  |  |  |  |  |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |  |  |  |  |  |  |  |  |
| No   |  |  |  |  |  |  |  |  |
| Yes  |  |  |  |  |  |  |  |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |  |  |  |  |  |  |  |  |
| ■ No □ Yes. Name of person   | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119). |  |  |  |  |  |  |  |

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main

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Page 51 of 55

Case Number (if known) \_\_\_\_

| or 1 Arnell Bryant Case First Name Middle Name Last Name   |                                  |
|--|----------------------------------|
| art 2: List Your Unexpired Personal Property Leases  |                                  |
| any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpi  | red Leases (Official Form 106G), |
| n the information below. Do not list real estate leases. <i>Unexpired lease</i> s are leases that are still in effec   | t; the lease period has not yet  |
| ed. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C.   | § 365(p)(2).                     |
| Describe your unexpired personal property leases   | Will the lease be assumed? ☐ No  |
| essor's name:  | No                               |
| Description of leased property:  | ☐ Tes                            |
| Lessor's name:   | □ No                             |
| Lesson's Harrie.   | ☐ Yes                            |
| Description of leased property:  |                                  |
| Lessor's name:   | No<br>Yes                        |
| Description of leased property:  | Li Yes                           |
| Lessor's name:   | No<br>                           |
| Description of leased property:  |                                  |
| Lessor's name:   | No<br>                           |
| Description of leased property:  |                                  |
| Lessor's name:   | □No                              |
| Description of leased property:  | Yes                              |
| Lessor's name:   | □ No                             |
| Description of leased property:  | Yes                              |
| Sine Below   |                                  |
| Part 3: Sign Below   | t secures a debt and any         |
| der penalty of perjury, I declare that I have indicated my intention about any property of my estate that rsonal property that is subject to an unexpired lease. |                                  |
| Agnell Bryant *  |                                  |
| Signature of Debtor 1 Signature of Debtor 2  Date Dated: 120 Date  |                                  |
| MM / DD / YYYY   |                                  |

### DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
   b. Failure to keep books and records documenting your financial affairs.
   c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
   d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others.
   e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
   f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankruptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

Dated: 4 43 /2016

Arnell Bryant

X Date & Sign

Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 53 of 55

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

in re

Arnell Bryant / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Arnell Bryant

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

## Case 16-30716 Doc 1 Filed 09/27/16 Entered 09/27/16 14:35:32 Desc Main Document Page 54 of 55

| Deb   | otor 1   | Amell                                    | Bryan   |                            | C        | Case Number (if known | ) |  | <del></del>                             |
|---|--|--|---|----------------------------|----------|-----------------------|---|--|---|
| ,   |  | First Name                               | Middle Name Last Nam  | ne ·                       | 5000     |                       |   |  | *************************************** |
|   |  |  |   |                            | 800      | Column A<br>Debtor 1  | ľ | Column B Debtor 2 or non-filing spouse |   |
| Ω   | llnomn   | loyment com                              | nensation   |                            |          | \$0.00                |   | \$0.00                                 | *************************************** |
|   | Do not   | enter the amo                            | ount if you contend that the amount received was a  | a benefit                  |          |                       | • | <u> </u>                               | Austraciacos                            |
|   | under ti   | ne Social Sec                            | urity Act. Instead, list it here:   |                            |          |                       |   |  | *************************************** |
|   | •  |  |   |                            |          |                       |   |  | anne anne                               |
|   | For yo   | ur spouse                                |   |                            |          |                       |   |  |   |
| 9.  |  |  | ent income. Do not include any amount received the cial Security Act.   | hat was a                  |          | \$0.00                |   | \$0.00                                 | uinusonaakkinaakkina                    |
| 10.   | Incom  | e from all oth                           | er sources not listed above. Specify the source a<br>penefits received under the Social Security Act or p   | and amount.                |          |                       |   |  | *************************************** |
|   | as a vi  | ctim of a war                            | crime, a crime against humanity, or international o   | r domestic                 |          |                       |   |  | *************************************** |
|   |  |  | ary, list other sources on a separate page and put  | the total on line 10c.     |          | \$0.00                |   | \$ 0.00                                | *************************************** |
|   |  |  |   |                            |          | \$ 0.00               | • | \$0.00                                 | 2000                                    |
|   |  |  |   |                            |          | \$0.00                |   | \$0.00                                 |   |
|   |  |  | from separate pages, if any.  |                            |          |                       | 1 |  |   |
| 11  | . Calcul<br>colum  | l <b>ate your tota</b><br>n. Then add ti | I current monthly income. Add lines 2 through 10 the total for Column A to the total for Column B.  | ) for each                 |          | \$2,972.67            | + | \$0.00] =                              | \$2,972.67                              |
|   |  |  |   |                            |          |                       |   |  | Military                                |
|   | Part 2:  | Petermin                                 | e Whether the Means Test Applies to You   |                            |          |                       |   |  |   |
|   |  |  | rent monthly income for the year. Follow these st   | tens:                      |          |                       |   |  | -                                       |
| 12  | . Caicu<br>12a.  | Copy your tot                            | tal current monthly income from line 11   |                            |          | Copy line 11 here     |   | 12a.                                   | \$2,972.67                              |
| est and the second  |  |  | 2 (the number of months in a year).   |                            |          |                       |   | S                                      | x 12                                    |
| ***************************************   | 12b.   |  | your annual income for this part of the form.   |                            |          |                       |   | 12b.                                   | \$35,672.04                             |
| 13  | 3. Calcu   | late the medi                            | an family income that applies to you. Follow the  | se steps:                  |          |                       |   |  |   |
|   | Eill in  | the state in w                           | hich you live   | IL                         |          |                       |   |  | *************************************** |
| -   |  |  |   |                            |          |                       |   |  |   |
|   | Fill in  | the number of                            | f people in your household.   | 2                          |          |                       |   | _                                      |   |
| ***************************************   | To fin   | d a liet of anni                         | amily income for your state and size of household.<br>licable median income amounts, go online using the<br>form. This list may also be available at the bankru | ne link specified in the : | separate |                       |   | 13.                                    | \$63,896.00                             |
| 14  | 4. <b>How</b> (  | do the lines c                           | compare?  |                            |          |                       |   |  | *************************************** |
| 14a. x ine 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3.                                  |  |  |   |                            |          |                       |   |  |   |
| 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Go to Part 3 and fill out Form 122A-2. |  |  |   |                            |          |                       |   |  |   |
| İ   | Part 3:  | Sign Bel                                 | low   |                            |          |                       |   |  |   |
|   | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. |  |   |                            |          |                       |   |  |   |
| Agnol Bryant  |  |  |   |                            |          |                       |   |  |   |
| ***************************************   |  | Date::                                   | 9123 12016  |                            |          |                       |   |  |   |
| ***************************************   |  | If you check                             | ed line 14a, do NOT fill out or file Form 122A-2.   |                            |          |                       |   |  |   |
|   |  | If you check                             | ed line 14b, fill out Form 122A-2 and file it with this   | s form.                    |          |                       |   |  |   |

Form B 201A, Notice to Consumer Debtor(s)

In re Arnell Bryant / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: <u>4/83</u>/2016

Arnell Bryant

X Date & Sign

Dated: 123\_/2016

Afforney Ricardo Gomez